

HOUSE BILL REPORT

SB 5242

As Passed House:

April 7, 2023

Title: An act relating to prohibiting cost sharing for abortion.

Brief Description: Prohibiting cost sharing for abortion.

Sponsors: Senators Cleveland, Robinson, Dhingra, Frame, Hasegawa, Hunt, Keiser, Lovelett, Nobles, Pedersen, Randall, Saldaña, Salomon, Stanford, Valdez, Wellman and Wilson, C..

Brief History:

Committee Activity:

Health Care & Wellness: 3/17/23, 3/22/23 [DP];

Appropriations: 3/30/23, 3/31/23 [DP].

Floor Activity:

Passed House: 4/7/23, 57-39.

<p>Brief Summary of Bill</p> <ul style="list-style-type: none">• Prohibits health plans from imposing cost-sharing for abortion services.
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HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass. Signed by 10 members: Representatives Riccelli, Chair; Bateman, Vice Chair; Bronoske, Davis, Macri, Orwall, Simmons, Stonier, Thai and Tharinger.

Minority Report: Do not pass. Signed by 6 members: Representatives Schmick, Ranking Minority Member; Hutchins, Assistant Ranking Minority Member; Barnard, Graham, Harris and Mosbrucker.

Staff: Kim Weidenaar (786-7120).

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HOUSE COMMITTEE ON APPROPRIATIONS

Majority Report: Do pass. Signed by 18 members: Representatives Ormsby, Chair; Bergquist, Vice Chair; Gregerson, Vice Chair; Macri, Vice Chair; Berg, Chopp, Davis, Fitzgibbon, Hansen, Lekanoff, Pollet, Riccelli, Ryu, Senn, Simmons, Slatter, Stonier and Tharinger.

Minority Report: Do not pass. Signed by 12 members: Representatives Stokesbary, Ranking Minority Member; Chambers, Assistant Ranking Minority Member; Corry, Assistant Ranking Minority Member; Chandler, Connors, Couture, Dye, Harris, Rude, Sandlin, Schmick and Steele.

Staff: David Pringle (786-7310).

Background:

A health plan, including student health plans, that provides coverage for maternity care or services must also provide substantially equivalent coverage to permit the abortion of a pregnancy. The plan may not limit a person's access to services related to the abortion of a pregnancy, except for generally applicable terms and conditions, including cost-sharing. A health plan is not required to cover abortions that would be illegal under state law.

Summary of Bill:

For health plans, including health plans offered to public employees and their covered dependents, issued or renewed on or after January 1, 2024, a health carrier may not impose cost-sharing for abortion of a pregnancy.

For health plans offered as a qualifying health plan for a health savings account, the health plan must establish the plan's cost-sharing for the coverage of abortion services at the minimum level necessary to preserve the enrollee's ability to claim tax exempt contributions and withdrawals from the enrollee's health savings account.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony (Health Care & Wellness):

(In support) An individual who has received abortion care in two countries has insight into what care in Washington can look like under this bill. Abortion services in the United

Kingdom were free and the only out-of-pocket was a small charge for pain medication. Conversely, the same procedure in the United States cost \$2,000. No one should have to choose between medically necessary care and necessities like food.

As of January 1, 2023, the United States Preventative Services Task Force has updated the preventative services to include some coverage of prenatal and postnatal visits as preventative visits so that there will not be any cost-sharing. Because state law requires abortion to be covered in a manner substantially equivalent to maternity care services, this bill will align the way these services are treated.

Patients break down in tears when faced with high out-of-pocket costs for abortions. People often assume that having private insurance means good insurance, but that is not necessarily the case. The average out-of-pocket cost for an abortion is \$218. Some individuals may have to put off procedures for several paychecks until they can afford it, but later procedures are more expensive. For many people a deductible of \$500 is more than they can afford. Funds providing coverage for abortions run out every year. Later abortions can cost between \$6,000 and \$10,000 and often need to be paid in advance.

(Opposed) Abortion was originally designed to exterminate the African American population, but in today's world view it is seen as women's empowerment. Identity politics is how we effectively communicate today and while the lives of many other groups matter, unborn lives do not matter. The Legislature should stand for life. Those who were adopted may not be here today if their birth mothers would have had abortion fully covered.

There is no such thing as a free lunch. This bill just shifts the costs to tax payers.

The question is if abortion is more deserving than maternity care. This bill does not cover maternity care and abortion is strongly opposed by many. Many others may support abortion, but object to covering the cost for these elective procedures. It is unconscionable to add these costs to the average taxpayer who is struggling to pay for necessities.

If some individuals had been born today with no cost for abortions, they may have been aborted, which is a scary thought. Having taxpayers fund abortions is wrong.

For those with Medicaid, the people of Washington are already footing the bill for abortions. We do not have endless funds and currently most Washingtonians are paying more for necessities. We do not need to increase costs for the rest of Washington to push the pro abortion agenda.

Staff Summary of Public Testimony (Appropriations):

(In support) State law requires health coverage of abortion if the plan covers maternity care, but the health plans offload costs back to patients through co-pays and co-insurance which range from \$15 to hundreds of dollars with an average of \$218. Abortions completed later

in pregnancy are far more expensive. Health care coverage should not dictate a person's pregnancy decisions and Washington should continue to lead in this area. This bill is an important move to eliminate obstacles to accessing care by removing cost barriers that otherwise may delay care.

The United States Preventative Services Task Force has included some coverage of prenatal visits as preventative visits so that there will not be any cost sharing. Because state law requires abortion to be covered in a manner substantially equivalent to maternity care services, this bill will align the way these services are treated.

(Opposed) The elimination of cost sharing does not eliminate the cost. Under this bill, Washington citizens will have to pay even more to compensate for this increase in cost while at the same time they are paying more for gas and groceries. There are already ample resources in Washington to obtain a free or low-cost abortion. It is not necessary to drive up the costs for everyone.

This bill raises the question of whether abortion is more deserving than maternity care because this bill does not cover maternity care. Abortion is a controversial procedure and is strongly opposed by many. Many others who do support abortion may object to covering the cost for these elective procedures. It is unconscionable to add these costs to the average taxpayer who is struggling to pay for necessities. Covering the cost-sharing of abortion is not something that the citizens of Washington should be covering and there should be another way to facilitate this agenda. This bill assumes that women choosing this procedure that is not medically necessary are more needy than everyone else.

Persons Testifying (Health Care & Wellness): (In support) Jane Beyer, Office of the Insurance Commissioner; Terra Compton; Jenna Udren, Northwest Abortion Access Fund; and Hilary Whitmore.

(Opposed) Theresa Schrempp; Laurie Layne; Julie Barrett, Conservative Ladies of Washington; and Anthony Mixer.

Persons Testifying (Appropriations): (In support) Nicole Kern, Planned Parenthood Alliance Advocates; Jane Beyer, Office of the Insurance Commissioner; and Alex Wehinger, Washington State Medical Association.

(Opposed) Julie Barrett, Conservative Ladies of Washington; Theresa Schrempp; and Eric Pratt.

Persons Signed In To Testify But Not Testifying (Health Care & Wellness): None.

Persons Signed In To Testify But Not Testifying (Appropriations): None.