



May 19, 2022

Via Electronic Mail

House Committee on Finance
HouseFinance@rilegislature.gov

Re: Support for H 7442

Dear Chair Abney, First Vice Chair Slater, Second Vice Chair Marszalkowski, and members of the House Finance Committee:

I write on behalf of GLBTQ Legal Advocates & Defenders (GLAD), a New England-based legal organization dedicated to creating a just society free of discrimination based on gender identity and expression, HIV status, and sexual orientation. GLAD writes in support of House Bill 7442, the Equality in Abortion Coverage Act, which will end the ongoing exclusion of abortion care from state Medicaid services and repeal the abortion coverage exclusion from state employee insurance plans. It is extremely important that Rhode Islanders have equal access to this vital health care.

As you know, Rhode Island has recently signaled its leadership in protecting reproductive rights and health care access. In 2019, the legislature passed the Reproductive Privacy Act, which enshrined into law the protections recognized by the Supreme Court in *Roe v. Wade*. H 7442 represents a critical next step by ensuring that this important healthcare and the right to abortion is accessible to all Rhode Islanders.

LGBTQ Rhode Islanders are significantly affected by this proposed legislation. Pregnancy and abortion are common experiences among people across all genders and sexual identities. In Rhode Island, an estimated 4.5% of the population identifies as LGBTQ.¹ LGBTQ people are at least as likely as other people who can become pregnant to experience unintended pregnancies and to require abortion care. More than 80% of bisexual women have experienced at least one pregnancy, as have more than a third of lesbians.² A substantial number of transgender and gender-expansive individuals who were assigned female at birth also may need pregnancy and abortion care throughout their lifetimes.³

Not only do significant numbers of LGBTQ people need abortion care, but LGBTQ people are more likely to be enrolled in Medicaid than their non-LGBTQ peers.⁴ This correlation is likely influenced by the fact that LGBTQ people are more likely than non-LGBTQ people to live in poverty and not to have health insurance.⁵ Medicaid is therefore a key source of health coverage for LGBTQ adults, with an

¹ LGBT Data & Demographics for Rhode Island, THE WILLIAMS INSTITUTE AT UCLA SCHOOL OF LAW (2019), <https://williamsinstitute.law.ucla.edu/visualization/lgbt-stats/?topic=LGBT&area=44#about-the-data>.

² Barbara G. Valanis et al., *Sexual Orientation and Health: Comparisons in the Women's Health Initiative Sample*, 9 ARCHIVES OF FAMILY MEDICINE 843, 843 (Sep. 2000) (abstract).

³ See Heidi Moseson et al., *Abortion Experiences of Transgender, Nonbinary, and Gender-Expansive People in the United States*, 224 AM. J. OBSTETRICS & GYNECOLOGY 376, 376 (2021).

⁴ Usha Ranji et al., "Health and Access to Care and Coverage for Lesbian, Gay, Bisexual, and Transgender Individuals in the U.S.," THE HENRY J. KAISER FAMILY FOUNDATION (April 2015), <http://files.kff.org/attachment/issue-brief-health-and-access-to-care-and-coverage-for-lgbt-individuals-in-the-u-s-2>.

⁵ Kellan Baker et al., *The Medicaid Program and LGBT Community: Overview and Policy Recommendations*, CENTER FOR AMERICAN PROGRESS (Aug. 9, 2016), <https://www.americanprogress.org/article/the-medicaid-program-and-lgbt-communities-overview-and-policy-recommendations/>.

estimated 1,171,000 LGBTQ persons aged 18-64 nationwide relying on Medicaid as their primary source of health insurance.⁶ In Rhode Island, LGBTQ people are more likely to be unemployed, food insecure, and have an income under \$24,000 than their non-LGBTQ counterparts.⁷ For Rhode Island LGBTQ people, H 7442 is critically important to ensure access to abortion health care.

The status quo – a ban on abortion care for Rhode Islanders on Medicaid – causes real harm and cannot persist. Individuals who are unable to access abortion care face particular harms that extend long beyond their pregnancy. People who are denied abortion health care are more likely to face economic hardship and poverty.⁸ Overall health outcomes are worse among people denied this important reproductive healthcare compared to those who were able to access care.⁹ LGBQ women in particular are more likely to face sexual victimization which contributes both to their facing unintended pregnancies at similar rates to non-LGBQ women as well as increased rates of poverty.¹⁰ Rhode Island high school students who identified as LGBQ or as unsure of their sexual orientation were significantly more likely to report having had sexual intercourse before age 13, having been physically forced to have sexual intercourse, and having experienced sexual dating violence than their non-LGBQ counterparts.¹¹ Among abortion patients in particular, LGBQ women are significantly more likely than non-LGBTQ women to experience sexual violence, sometimes by a factor of 15 or more.¹² Adolescents who are lesbian and bisexual also have especially high risk of unintended pregnancy due to social pressures to hide their sexual orientation.¹³ The 2019 Data Brief on Adolescent Sexual Health in Rhode Island found that “LGB youth continue to be more likely to engage in risky sexual behaviors than heterosexual youth.”¹⁴ Overall, the unique vulnerability of LGBTQ people puts them at high risk of experiencing harms from denial of abortion care.

Rhode Island’s current prohibition on the use of Medicaid and state insurance funds for abortion healthcare causes harm and presents a significant barrier to LGBTQ people’s bodily autonomy, health, and well-being. As it stands, existing Rhode Island law prohibits Rhode Islanders from seeking vital abortion healthcare through state insurance and Medicaid programming,¹⁵ placing Rhode Island behind neighboring

⁶ Kerith Conron & Shoshana Goldberg, *LGBT Adults with Medicaid Insurance*, THE WILLIAMS INSTITUTE AT UCLA SCHOOL OF LAW (Jan. 2018), <https://williamsinstitute.law.ucla.edu/publications/lgbt-medicaid-coverage-us/>.

⁷ *Supra* note 2.

⁸ Diana Greene Foster et al., *Socioeconomic Outcomes of Women Who Receive and Women Who are Denied Wanted Abortions in the United States*, 108 AM. J. PUBLIC HEALTH 407, 407 (Mar. 2018).

⁹ Lauren J. Ralph et al., *Self-reported Physical Health of Women Who Did and Did Not Terminate Pregnancy After Seeking Abortion Services: A Cohort Study*, 20 ANNALS OF INTERNAL MED. 238, 244-45.11 (Aug. 20, 2019).

¹⁰ Caroline Sten Hartnett et al., *Congruence Across Sexual Orientation Dimensions and Risk for Unintended Pregnancy Among Adult U.S. Women*, 27 WOMEN’S HEALTH ISSUES 145, 145 (2017) (finding that unintended pregnancies are at least as common for sexual minority women as for heterosexual women); Bethany G. Everett et al., *Sexual Orientation Disparities in Mistimed and Unwanted Pregnancy Among Adult Women*, 49 PERSPECTIVES ON SEXUAL AND REPRODUCTIVE HEALTH 157, 161-62 (Sep. 2017) (finding that adult and adolescent sexual minority women are at greater risk of unintended pregnancy than are their heterosexual counterparts); and Rachel K. Jones et al., *Sexual Orientation and Exposure to Violence Among U.S. Patients Undergoing Abortion*, OBSTET. & GYNECOL. 605, 610 (Sept. 2018).

¹¹ *State Profile – Rhode Island*, SEXUALITY INFORMATION AND EDUCATION COUNCIL OF THE UNITED STATES (2019), <https://siecus.org/wp-content/uploads/2019/03/Rhode-Island-FY18-Final.pdf>.

¹² Jones et al., *Sexual Orientation...*, at 609.

¹³ See Susan M. Blake et al., *Teen Pregnancy Preventing Sexual Risk Behaviors Among Gay, Lesbian, and Bisexual Adolescents: The Benefits of Gay-Sensitive HIV Instruction in Schools*, 91 AM. J. PUBLIC HEALTH 940, 944 (June 2001).

¹⁴ *Adolescent Sexual Health – 2019 Data Brief*, RHODE ISLAND DEPARTMENT OF HEALTH (2020), <https://health.ri.gov/publications/databriefs/2019ASHDataBrief.pdf>.

¹⁵ R.I. GEN. LAWS § 36-12 2.1.

states such as Connecticut and Massachusetts who already ensure this healthcare coverage for Medicaid-covered populations.¹⁶

H 7442 represents an important step in ensuring access to reproductive health care for all Rhode Islanders, including LGBTQ people, by providing for Medicaid coverage of abortion and repealing the abortion coverage exclusion from state employee insurance plans. Thank you for the opportunity to provide testimony in support of H 7442, and GLAD, and the supporting organizations listed below, hopes the bill will receive a favorable vote out of committee.

Sincerely,



Patience Crozier, Esq.
Senior Staff Attorney

Signing on in support:

Youth Pride, Inc.
Jodi L Glass, AuD
SHIP
Denise Crooks
ACLU of Rhode Island
Project Weber/RENEW
Planned Parenthood Votes! Rhode Island

¹⁶ *State Funding of Abortion Under Medicaid*, GUTTMACHER INSTITUTE (Jan. 1, 2022), <https://www.guttmacher.org/state-policy/explore/state-funding-abortion-under-medicaid>.