



NARAL

Pro-Choice Colorado

October 12, 2007

Mr. Bill Lindsay
Chairman
The Blue Ribbon Commission for Health Care Reform
c/o The Colorado Foundation for Families & Change
303 E. 17th Ave., Ste. 400
Denver, CO 80203

Sent via Facsimile: (303) 837-8496

Dear Mr. Lindsay,

As the political action arm of the pro-choice movement in Colorado, NARAL Pro-Choice Colorado (NPCC) works to ensure that the one million women of childbearing age in Colorado and their families have access to the full range of reproductive health care options. As such, NPCC urges the Blue Ribbon Commission for Health Care Reform to critically evaluate three issues related to reproductive health care:

1. Guaranteed access to the full range of reproductive health care options
2. No infringement on a woman's right to safe, legal abortion in Colorado
3. Emphasis on prevention first in reproductive health care to prevent unintended pregnancy.

The sections below detail NARAL Pro-Choice Colorado's specific concerns surrounding these issues.

1. Guaranteed access to the full range of reproductive health care options

To ensure that Colorado women and their families have access to the full range of reproductive health care options, the Commission's final recommendations to the Colorado General Assembly should incorporate the following principles:

- All Colorado women and their families have the right to access comprehensive family planning services; prenatal care; neo-natal services; adoption counseling; and safe, legal, accessible, and affordable abortion. For reproductive health care services to be considered accessible, geographic, cost-related, cultural and linguistic barriers would need to be mitigated or eliminated.
- All Colorado women and their families must have access to comprehensive, scientific and medically accurate information to enable them to make responsible, informed

decisions about preventing unintended pregnancy, bearing healthy children, or choosing safe, legal abortion.

- Health reform plans should emphasize prevention first in reproductive health care to address the barriers and challenges to preventing unintended pregnancy in Colorado without denying women the fundamental right to receive safe, legal medical care.

2. No infringement on a woman's right to safe, legal abortion in Colorado

Of particular concern is the fact that Colorado Constitution Article 5, §50 prohibits state funds from being used to cover the costs of abortion services, with exceptions for instances of rape or incest or to preserve the health or life of a woman. When considered in conjunction with U.S. Supreme Court decisions prohibiting states from restricting women's right to choose abortion or from imposing an undue burden on women's ability to access abortion, the Blue Ribbon Commission for Health Care Reform has an affirmative responsibility to ensure that the legal right to abortion in Colorado will not be restricted or impeded. Moreover, given that all five final proposals expand state coverage of health care services to varying degrees, the Commission must ensure that low- and middle-income Colorado women are not disproportionately prevented from accessing safe, legal abortion.

3. Emphasis on prevention first in reproductive health care to prevent unintended pregnancy

Each year in Colorado, more than 27,500 births result from unintended or unwanted pregnancies.ⁱ Moreover, unintended pregnancies just among teens cost Colorado taxpayers \$101 million in 2004.ⁱⁱ In 2002, Medicaid covered costs for more than 28,000 births -- just over 40% of all births in our state.ⁱⁱⁱ Furthermore, birth-related costs nationally are estimated at anywhere from \$8,239 for healthy births to \$280,000 for births with complications when covered through a consumer-driven health plan; plus up to \$41,000 in infant care costs for complications related to pre-term delivery.^{iv} Finally, unintended pregnancies are known to correlate to factors associated with long-term health consequences, including pre-term and low-birth-weight babies and higher rates of early term alcohol and tobacco use by women who don't know they're pregnant.^v

With this in mind, the Blue Ribbon Commission for Health Care Reform should clearly demonstrate how the recommended model(s) achieves the following:

1. Enable Colorado to meet its stated goal of reducing the rate of unintended pregnancy to no more than 30% by 2010.^{vi}
2. Maximize the number of Coloradans able to use Title X and Medicaid programs for primary preventive care services and secondary pregnancy prevention for at-risk populations.
3. Increase access to comprehensive, medically and scientifically accurate family planning services.

4. Ensure that Colorado women and their families are not penalized for accessing preventive care, such as family planning services, through subsequent rate increases for health coverage.
5. Provide accessible and affordable coverage for all forms of contraceptive methods, including birth control pills, emergency contraception, injectibles, the NuvaRing, IUDs, and surgical methods such as tubal ligation and vasectomy.
6. Ensure that Coloradans are not denied coverage for complications resulting from reproductive health care services, including abortion, high-risk pregnancy, pre-term delivery, or contraceptive methods requiring surgery.

If you or any other members of the Commission have any questions about these issues, please feel free to contact NARAL Pro-Choice Colorado directly at (303) 394-1973. Thank you for your consideration and your commitment to ensuring all Coloradans have access to quality, affordable comprehensive health care.

Sincerely,

Kathryn Wittneben
Executive Director

Toni Panetta
Deputy Director

ⁱ “Colorado Pregnancy Risk Assessment Monitoring System (PRAMS),” Colorado Department of Public Health and Environment, accessed at <http://www.cdphe.state.co.us/hs/prams>.

ⁱⁱ “By the Numbers: The Public Costs of Teen Childbearing in Colorado,” 2006, The National Campaign to Prevent Teen Pregnancy, accessed at <http://www.teenpregnancy.org/costs/pdf/COLORADO.pdf>

ⁱⁱⁱ “Births Financed by Medicaid as a Percent of Total Births, 2002,” Kaiser Family Foundation, accessed at <http://www.statehealthfacts.org/comparemaptable.jsp?ind=223&cat=4>

^{iv} “Maternity Care and Consumer-Driven Health Plans,” June 2007, Kaiser Family Foundation, accessed at <http://www.kff.org/womenshealth/upload/7636ES.pdf>; “Costs of Maternity and Infant Care,” 2007, March of Dimes, accessed at <http://www.kff.org/womenshealth/upload/whp061207othd.pdf>.

^v “Health Watch 43: Unintended Pregnancy: Colorado Pregnancy Risk Assessment Monitoring System (PRAMS)” 1997-1999. Colorado Department of Public Health and Environment, accessed at: http://www.cdphe.state.co.us/hs/pubs/brief43Web_ps.pdf.

^{vi} “Healthy Colorado 2010,” 2005, Colorado Department of Public Health and Environment, accessed at: <http://www.cdphe.state.co.us/oll/HealthyColorado2010.pdf>