

Fact Sheet: D.C. Statehood and Taxpayer Funding of Abortion

Medicaid covers abortions only in rare cases. Since 1976, federal funding for Medicaid has been passed by Congress with an annual rider known as the Hyde Amendment, which limits federal dollars from funding abortion except in instances of rape, incest, or danger to the life of the mother. Some states have chosen to use their own state funds to pay for the abortions of women enrolled in Medicaid, but under the Hyde Amendment, this funding must be maintained separately from the federal Medicaid program.

Currently, the District of Columbia does not fund abortion. As a district rather than a state, D.C.'s budget is controlled by Congress, which in most years includes the Dornan Amendment, a D.C. version of the Hyde amendment that blocks District tax dollars from funding abortion. In 2009 and 2010, a pro-abortion Congress passed D.C.'s budget with a weakened version of the Dornan Amendment, allowing the District to use its own funds for abortion. Due to administrative delays, though, D.C. did not actually begin paying for abortions until August 2010. Eventually, D.C. funded approximately 300 abortions before the full Dornan Amendment was reinstated in 2011 and abortion funding was cut off.¹

However, if the District of Columbia were to become the 51st state, its budget would no longer be controlled by Congress, and D.C. would likely join the list of states that use state tax dollars to fund abortions for women enrolled in Medicaid. As the experiences of these states have shown, taxpayer funding of abortion drives up the abortion rate,² and recent peer-reviewed research has demonstrated that among the 17 states that pay for abortions, a woman who undergoes a state-funded abortion is likely to get additional abortions.³ If D.C. makes abortion funding a regular part of its budget and builds out the necessary administrative systems, the District will no doubt fund far more than 300 abortions annually.

A close look at the neighboring state of Maryland, which uses state funds to cover abortions for women enrolled in Medicaid, gives some clues as to what taxpayer-funded abortion might look like in the District of Columbia.⁴ If D.C. funded abortions at the same rate Maryland does, **D.C. tax dollars would pay for an estimated 1,400 – 1,500 abortions every year.**

¹ <https://www.nbcwashington.com/news/local/dc-funded-300-abortions-in-2-years-ap/1897145/>

² See <https://lozierinstitute.org/addendum-to-hyde-40-analyzing-the-impact-of-the-hyde-amendment/>

³ Studnicki J, Fisher JW, Reardon DC, et al. Pregnancy outcome patterns of Medicaid-eligible women, 1999-2014: a national prospective longitudinal study. *Health Serv Res Manag Epidemiol.* 2020;7.

<https://journals.sagepub.com/doi/full/10.1177/2333392820941348>

⁴ Maryland does not collect abortion data, and until recently, reporting in D.C. has been voluntary. Consequently, the abortion totals and rates used here are estimates from the Guttmacher Institute. A Maryland budget report provides the total of state-funded abortions for 2014, 2015, and partial 2016. Approximately 19% of Maryland women ages 15-44 were on Medicaid during these years (Guttmacher). This produces an abortion rate of 34 to 35 abortions per 1,000 women enrolled in Medicaid – 1.5 to 1.6 times the Maryland's overall resident abortion rate.

The impact on the total number of abortions occurring in D.C. each year may vary. Many women on D.C. Medicaid already get abortions, and D.C. has a robust abortion fund network in place to pay for the abortions of low-income women.⁵ Additionally, D.C.'s resident abortion rate fluctuates from year to year, partially as a result of abortion centers opening and closing in the District. Furthermore, in states that fund abortion, the abortion rate for women enrolled in Medicaid and the overall state abortion rate are not independent; state-funded abortions contribute to the overall rate. As a result, the difference between D.C.'s current abortion rate and any future state-funded abortion rate may be even greater than the estimates used here.

In D.C., approximately 23% of women ages 15-44 are on Medicaid (Guttmacher). D.C.'s 2017 resident abortion rate was 21.1 abortions per 1,000 women 15-44 (Guttmacher). Multiplying this rate by 1.5 to 1.6 and applying that to the population of D.C. women on Medicaid produces an estimated 1,386 to 1,478 taxpayer funded abortions per year. See Guttmacher resident abortion rate estimates:

<https://data.guttmacher.org/states/trend?state=US&topics=68&dataset=data>

⁵ See <https://dcabortionfund.org/>