



UNFAVORABLE STATEMENT
**HB689/SB506 Maryland Medical Assistance Program –
Use of Reimbursement Funds by Schools**

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We Strongly Oppose Public Funding for Abortion in Our Schools

Maryland Right to Life, Inc. strongly objects to any appropriation of public funds for the abortion industry to operate within public schools, including Planned Parenthood, Advocates for Youth, NARAL Pro-Choice Maryland and others. We urge the state to put the safety of patients, in this case school children, before abortion politics and profit, by amending this bill to exclude abortion workforce funding.

The Maryland Medical Assistance Program and the Maryland Children's Health Program (MCHP) are the two primary programs used for publicly funded reimbursements to abortion providers in Maryland.

Without an amendment to exclude the use of Maryland Medical Assistance Program reimbursements for abortion providers or abortion-related services, this bill would allow additional taxpayer funds to be used to hire, train and contract with abortion providers operating in or through Maryland schools – to the detriment of children's physical and mental health.

The state should not prioritize the expansion of an abortion workforce in schools over the legitimate healthcare needs of Maryland children who might otherwise benefit from this bill. While there are legitimate health providers and services in schools or school-based health centers that should benefit from these reimbursements, induced abortion is not healthcare and abortionists should not be eligible for any public funding.

Maryland Subsidizes Abortion Workforce

In 2022, the Maryland General Assembly made it clear that it was a legislative priority to subsidize and expand an abortion workforce in our state. By enacting the **Abortion Care Access Act** (Chapter 56), the state established the **Abortion Care Clinical Training Program**, and mandated an annual budget appropriation of **\$3,500,000** to train more abortionists.

Under that law, the state reduced the safety and standard of medical care for women obtaining abortions by allowing non-physicians and in fact *any individual certified by the state to perform or provide abortions*. The law was enacted without any definition of the training program, including which third-parties the state would contract with to train and certify the substandard abortion workforce.

Abortion Coercion In Our Schools

This state of Maryland has an obligation to provide a safe learning environment for Maryland school children but has been derelict in this duty by giving abortion activists and others third parties unfettered access to prey on

vulnerable school children. The state must not force local schools to become active partners with the abortion industry, become part of the abortion drug distribution chain, subject minor children to abortion coercion at the hands of adults within the school system, shield pedophiles and rapists, or undermine parental rights to make medical decisions for their children.

The state including the Department of Education and the Department of Health have become state sponsors of the abortion industry, using taxpayer funds to contract out educational curriculum development, programs, training and school health services to questionable third-party organizations that are financially interested in abortion sales, including Planned Parenthood and Advocates for Youth. Together they have established the existing **Maryland Comprehensive Health Education Framework** and the **Maryland Standards for School-Based Health Centers**.

While the abortion industry is not yet performing surgical abortions in School-Based Health Centers, since 2020 (Chapter 198) they are eligible to manage SBHC's in Maryland. SBHC's in Maryland already subject school children to abortifacients, abortion counseling and referral – all without parental notice or consent.

In 2024 the Maryland General Assembly enacted a School Telehealth law (Chapter 195) to require all schools to implement school telehealth plans, allowing adults to gain online access to schoolchildren including for the purposes of remotely prescribing chemical abortion drugs to induce abortion.

Abortion drugs, which are 4 times more dangerous than surgical abortion, can now be distributed by any certified provider, who may be a school health provider or other remote abortion provider. “Do-it-Yourself” abortions pose great risk to children who are being denied the benefit of a full obstetrical examination or medical oversight before being subscribed these dangerous drugs that have been known to cause hemorrhaging, infection and even death.

The abortion industry cannot be trusted with the reproductive health of our youth. Abortion businesses have been exposed promoting irresponsible sex and providing faulty contraception to meet abortion sale quotas. Carol Everett operated abortion clinics in the Dallas area in the 1970s and explained how sex-ed was an important part of cultivating and maintaining abortion sales among younger clientele.

Sex-ed was calculated, she said, “to separate the children from their values and their parents,” adding that, at one point, her business’ goal “was to assure every girl between the ages of 13 and 18 have three to five abortions.”

Finally, in junior high, Everett said, “My goal was to get them sexually active on a low dose birth control pill that we knew they would get pregnant on. How do you do that? You give them a low dose birth control pill that has to be taken accurately at the same time every single day. And you know and I know, there’s not a teen in the world who does everything the same time every day.”

Abortion Funding through Maryland Medicaid

Abortion is big business in Maryland. Maryland taxpayers subsidize the abortion industry in Maryland through direct Maryland Medicaid reimbursements to abortion providers, through various state grants and contracts, and

through pass-through funding in various state programs. Health insurance carriers are required to provide reproductive health coverage to participate with the Maryland Health Choice program.

Maryland is one of only 4 states that forces taxpayers to fund abortions. Regardless of how one feels about the legality of abortion, there is longstanding bi-partisan unity on prohibiting the use of taxpayer funding for abortion. 57% percent of those surveyed in a January 2025 Marist poll say they oppose taxpayer funding of abortion. 67% of Americans in that same poll support legal limits on abortion, particularly after the first trimester.

The ***Maryland Medical Assistance Program*** and the *Maryland Children's Health Program* (MCHP) are the two primary programs used for publicly funded reimbursements to abortion providers in Maryland. Medical Assistance Expenditures on Abortion Language attached to the Medicaid budget since 1979 authorizes the use of State funds to pay for abortions under specific circumstances. Specifically, a physician or surgeon must certify that, based on his or her professional opinion, the procedure is medically **necessary**.

Similar language has been attached to the appropriation for **MCHP** since its advent in fiscal 1999. However, this provision is regularly abused by abortionists for reasons other than medical necessity and state funds now routinely reimburse abortionists for elective abortions.

According to the Maryland Department of Legislative Services in their *Analysis of the FY2025 Maryland Executive Budget, 2024* Maryland taxpayers, through the Maryland Medical Assistance Program, are being forced to pay for *elective* abortions. In 2023, we spent at least **\$7.9 million for 12,727 abortions, less than 11 of those abortions were due to rape, incest or to save the life of the mother (see attachment.)**

Maryland is Failing to Protect Children

The Assembly recently removed protections under the law for children by reducing the age of medical consent for behavioral health services to 12 years of age. Mental health, including anxiety or depression has long been used to justify taxpayer funded abortion including on minor girls. The same businesses who commit abortions, are expanding their business models and their reach over defenseless children by pushing puberty blockers and genital mutilation. Some have expressed their intention to use school psychologists and counselors as a feeder system to prey upon school children for their own financial gain.

While Maryland law already permits girls 16 and over to undergo abortion procedures without parental notice or consent, we do not know how many abortions are committed on children under the age of 16. The state shields abortionists by allowing them to commit abortions without reporting requirements to the state or the Centers for Disease Control. Maryland is one of only three states that do not require abortion reporting.

While abortion providers are supposed to be subject to the law as mandatory reporters of suspected child abuse, we are aware of no such report. Inspections of abortion clinics and practices are complaint-driven only. But even after two women suffered near fatal injuries from botched abortions in Bethesda, the Maryland Department of Health refused to inspect the facility until after legal action was taken by the victims.

Parental Notice and Consent Provides Better Outcomes for Youth

Maryland Right to Life trusts parents to make the best decisions about their children's health. State law must recognize the natural and legal right of parents to provide consent for their children's medical care. But the state has repeatedly demonstrated a wanton disregard for the rights of parents and the welfare of school children. Under the influence of the abortion industry, the state removed the requirement that parents must first provide consent before their daughter can obtain an abortion if under the age of 16. The statutory parental notification requirement is routinely waived at the discretion of the abortionists.

The State of Maryland, through the Department of Education has been entrusted by parents with the academic instruction of Maryland children. The state has far exceeded its limited authority to act in place of the parents during the school day, particularly in the matter of student health. Parents expect their children will be taught health and human reproduction-not sexuality. Parents send their daughters to school for an education, not for an abortion. The state must restore the trust of parents by expelling abortion businesses from our schools.

Abortion is not healthcare

Induced abortion is not healthcare. It is violence and brutality that ends the lives of unborn children through suction, dismemberment or chemical poisoning. The fact that 85% of OB-GYNs in a representative national survey do not perform abortions on their patients is glaring evidence that abortion is not an essential part of women's healthcare.

Combine this with the fact that nearly 70% of abortions are now "Do-It-Yourself" abortions where women are remotely prescribed dangerous abortion pills without a physician's examination and are left to hemorrhage alone until their bodies forcefully expel their babies' bodies, and the argument that abortion is healthcare is completely discredited.

Women and girls have legitimate options for reproductive healthcare. There are 14 federally qualifying healthcare centers for every Planned Parenthood in Maryland. There are four times more pregnancy centers that offer lifesaving alternatives to abortion at NO COST to women or taxpayers.

State-sponsored abortion is having a genocidal impact on Black Marylanders

Abortion has a disproportionate impact on Black Americans who have long been targeted by the abortion industry for eugenics purposes. Even today 78% of abortion clinics are located in minority communities. As a result abortion violence has become the leading killer of Black lives, more than gun violence and all other causes combined. More than half of all pregnancies to Black women in Baltimore City end through abortion violence.

The state fails to measure or report the correlation between the increased use of abortion with the increased risk to maternal mortality, infertility, miscarriage, pre-term births for Black mothers. This

makes any argument that abortion is healthcare a morally repugnant call for state-sponsored genocide of Black children in Maryland.

Funding restrictions are constitutional

The Supreme Court of the United States, in *Dobbs v. Jackson Women's Health* (2022), overturned *Roe v. Wade* (1973) and held that there is no right to abortion found in the Constitution of the United States. As early as 1980 the Supreme Court affirmed in *Harris v. McRae*, that *Roe* had created a limitation on government, not a government funding entitlement. The Court ruled that the government may distinguish between abortion and other procedures in funding decisions -- noting that “*no other procedure involves the purposeful termination of a potential life*”, and held that there is “*no limitation on the authority of a State to make a value judgment favoring childbirth over abortion, and to implement that judgment by the allocation of public funds.*”

Once again, we urge your amendment of this bill to put the health and safety of Maryland school children before abortion politics and profits. Maryland Medical Assistance Program reimbursement funds should be prioritized for the legitimate healthcare needs of students, and not invested in expanding an abortion workforce in our schools.

Planned Parenthood plans to infiltrate high schools

by [Kate Hardiman, Contributor](#) | December 16, 2019 02:01 PM

Planned Parenthood announced it will be opening 50 clinics in Los Angeles high schools last week. This is just the organization's latest attempt to infuse its values into the public school system.

Though the new "Wellbeing Centers" stop short of offering surgical abortions, they will provide emergency contraception, STI testing and treatment, and a wide range of birth control options. Funded by a \$10 million grant from Los Angeles County and \$6 million from Planned Parenthood, 50 clinics will open over the next three years, available to more than 75,000 students.

Students can walk into the clinics anytime — including during class. Per California law, minors can receive emergency contraception and other forms of birth control, and healthcare providers are not allowed to inform their parents without the minor's permission.

The clinics will also train hundreds of teens to be "peer advocates" about "safe sex and relationships" and will provide "pregnancy counseling." Pro-life advocates believe these are thinly-veiled efforts to drive more business to Planned Parenthood's abortion-providing clinics.

"If LAUSD truly cares about the health of our daughters (and sons) it would not give unfettered access to our kids to an organization that directly benefits from unplanned pregnancies," 28-year California public school teacher and founder of the nonprofit organization For Kids and Country Rebecca Friedrichs said in a statement.

"District officials are quick to point out these clinics won't technically offer abortions on-premises, but no one is fooled that abortion won't be heavily pushed on our daughters and sons by an organization that has made billions off the macabre practice," she concluded.

This move builds upon [the controversial sex education framework](#) California forced into its public schools in April. Planned Parenthood helped draft and lobby for this effort — which pushes schools to teach young children about gender identity and how to perform certain types of sexual acts.

Roughly 200 parents marched on Sacramento against the curriculum before it was enacted, and a petition in Fremont, California, garnered more than 8,000 signatures. The outcry over Planned Parenthood's new in-school clinics could be even louder.

Parents should be alarmed by Planned Parenthood's latest effort to usurp their authority as the primary educators of their children, and the Los Angeles school system's acquiescence. As progressive groups continue to co-opt public schools, parents will increasingly face a decision about whether they must leave the system — or risk the state deciding it knows best for their children.

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