

February 22, 2022

Chair Shane E. Pendergrass
House Office Building
6 Bladen St.
Annapolis, MD 21401

SUPPORT – HB 952
Access to Abortion Care and Health Insurance Act

Dear Honorable Chair Pendergrass,

As Medical Director and Vice President of Medical Affairs for Planned Parenthood of Metropolitan Washington, DC (PPMW), I am proud to submit testimony with PPMW's strong support of House Bill 952, Access to Abortion Care and Health Insurance Act. This bill would improve access to abortion — and in particular it would support more equitable access — by improving insurance coverage for Marylanders seeking abortion.

I am a practicing OB/GYN in Maryland, as well as Washington, D.C. and Virginia. For more than 15 years, I have been honored with the trust of patients seeking a broad spectrum of health care, including abortion.

PPMW is privileged to provide high quality, comprehensive reproductive health care, including abortion, at health centers in Suitland and Gaithersburg, as well as provide high quality sexual health education across Prince George's and Montgomery Counties. PPMW has been proud to provide this care for over 80 years on the principle that everyone deserves equal access to health services. We commit to caring for your constituents by providing contraceptives, tests for sexually transmitted infections, and lifesaving cancer screenings such as breast exams, as well as gender-affirming care, and abortion.

As an abortion provider, I see firsthand how lack of insurance coverage can impact someone's ability to access abortion. Without insurance coverage, some individuals are forced to postpone abortion until they can scrape together the funding to pay out-of-pocket. This delay results in the abortion occurring later in pregnancy — and while abortion is a very safe procedure, delaying abortion increases health risks, and also adds additional cost as procedures become more expensive later in pregnancy. When people must postpone abortions because they are unable to pay for them, their health is unnecessarily being put at risk and the financial barrier becomes even greater.

Currently, Maryland does not have equitable access to abortion coverage. For example, Maryland Medicaid's coverage of abortion is subject to debate each year as part of Maryland's state budget process, and only allows for care to be covered in certain circumstances. Marylanders with low incomes – those who face the greatest challenges covering the cost of abortion – should be able to rely on permanent coverage. Private insurance plans' coverage of abortion is extremely susceptible to attacks at the federal level. Even if people do have insurance coverage, cost-sharing and deductibles often require people to pay amounts that can put abortion out of reach.

Abortion access is an economic justice, racial justice, and gender justice issue. Financial hardship disproportionately harms Black, Latino, and Indigenous communities, people with disabilities, people in rural areas, young people, immigrants, and those having difficulty making ends meet.

Simply put, abortion access shouldn't depend on someone's insurance status. Both private insurance and Medicaid should provide equitable abortion coverage without imposing obstacles like cost-sharing and deductible requirements. On behalf of PPMW, I urge swift passage of HB 952 to foster greater equity and eliminate obstacles to better support our diverse communities in their efforts to get the care they need.

Thank you for your consideration of this testimony in support of HB 952. If we can provide any further information, please do not hesitate to contact me at serina.floyd@ppmw.org.

Sincerely,

Serina Floyd, MD MSPH FACOG
Medical Director/Vice President of Medical Affairs
Planned Parenthood of Metropolitan Washington, D.C.