

**To: Assembly Committee on Health**  
**From: Sara Finger, Executive Director**  
**Re: Testimony in Opposition to 2017 Wisconsin AB 128**  
**Date: April 19, 2017**

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Members of the Assembly Committee on Health, thank you for the opportunity to submit this written testimony in opposition to AB 128, which would prohibit the Group Insurance Board (GIB) from providing public employees in Wisconsin with access to health insurance plans that provide coverage for abortions, with limited exceptions. As an organization dedicated to ensuring that every Wisconsin woman is able to reach her optimal health, safety, and economic security, the Wisconsin Alliance for Women's Health (WAWH) is disappointed by the continued focus of this Legislature on proposals that would reduce women's access to reproductive health care instead of proactive policies that would improve access to care and health outcomes for Wisconsin women and families. As a result, I respectfully request that you oppose AB 128.

AB 128 represents yet another attempt to insert politics into the personal decision making and health care needs of women in Wisconsin. However, at this time, it is currently unclear how AB 128 will change the current policies of GIB and the insurance plans with which it contracts. The bill does contain some narrow exceptions to its proposed prohibitions on abortion coverage and there is a lack of publicly available information regarding under what circumstances abortions would be eligible for coverage under current GIB and individual plan policies.

Based on the contents of the bill, AB 128 is most likely to affect women who are public employees and have complicated pregnancies that involve severe fetal anomalies and wish to terminate a pregnancy. Should this bill pass, it is possible that women who are public employees who find themselves in an already unfortunate medical situation over which they have no control will not only face making a difficult decision about whether to terminate what is often a wanted pregnancy, but will also be confronted with the harsh financial reality that they may not be able to choose to end that pregnancy without enduring severe financial hardship. However, it would be greatly helpful if a representative of GIB were able to provide testimony or further clarification regarding GIB's assessment of the practical ramifications for affected state employees should AB 128 become law.

AB 128 is particularly troubling for women working in lower-wage fields of public employment, which are jobs that tend to be disproportionately filled by women. Many of these employees and their families may not be able to afford the out-of-pocket costs of an abortion (which can range from about \$400 to several thousand dollars depending on the circumstances) without experiencing significant financial hardship.

This is not a reasonable or fair burden to place on the public employees that our communities rely on to provide us with essential services, from providing home health care to people with disabilities to educating our children. It is particularly unfair since this legislation specifically prohibits coverage for access to care that can only be used by women, who happen to represent 52 percent of public sector workers in the country and 61 percent of local public sector workers.

If reducing the number of abortions in Wisconsin is truly the goal of the individuals and organizations supporting AB 128, WAWH would humbly suggest that they cease their focus on implementing every fathomable obstacle to accessing abortion care and begin to prioritize public policies that have actually demonstrated success in preventing unintended pregnancies and reducing abortion rates. Study<sup>1</sup> after

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<sup>1</sup> See [http://thelancet.com/journals/lancet/article/PIIS0140-6736\(16\)30380-4/abstract](http://thelancet.com/journals/lancet/article/PIIS0140-6736(16)30380-4/abstract)

study<sup>2</sup> indicates that increasing women's access to contraception and family planning services significantly reduces the occurrence of unintended pregnancies and abortion rates. Despite this overwhelming evidence, for the past six years this Legislature has virtually ignored proactive public policies that would actually increase women's access to family planning services and has actually worked to undermine the existing family planning services infrastructure in Wisconsin.

Just as importantly, we have also seen a dearth of state policies, such as paid family and medical leave, that will actually provide meaningful support to working families when they welcome a newborn child into the world. These types of policies have tangible child and maternal health benefits all while increasing paternal engagement in caretaking<sup>3</sup>. A focus on these types of positive, proactive policies that will actually improve the lives of working women and their families would go a long ways towards ensuring that families have the support they need to effectively balance the competing demands of their family and work responsibilities. Simply reducing access to abortion does nothing to address these economic realities faced by almost every family in Wisconsin.

Thank you for taking the time read my testimony. I strongly urge you to oppose AB 128 for the possible adverse effects it will have on women who are public employees in our state and to begin supporting evidence-based policies that are proven to benefit the overall health and wellbeing of Wisconsin women and families.

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<sup>2</sup> See <https://medicine.wustl.edu/news/access-to-free-birth-control-reduces-abortion-rates>

<sup>3</sup>See <https://iwpr.org/wp-content/uploads/wpallimport/files/iwpr-export/publications/B334-Paid%20Parental%20Leave%20in%20the%20United%20States.pdf>