Who Decides?

The Status of Women’s Reproductive Rights in the United States

NARAL Pro-Choice America
NARAL Pro-Choice America Foundation
### 2015 REPORT CARD ON WOMEN’S REPRODUCTIVE RIGHTS

<table>
<thead>
<tr>
<th>State</th>
<th>Rank</th>
<th>Grade</th>
<th>State</th>
<th>Rank</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alabama</td>
<td>39 (tie)</td>
<td>F</td>
<td>Montana</td>
<td>10 (tie)</td>
<td>A-</td>
</tr>
<tr>
<td>Alaska</td>
<td>14</td>
<td>B+</td>
<td>Nebraska</td>
<td>38</td>
<td>F</td>
</tr>
<tr>
<td>Arizona</td>
<td>26</td>
<td>F</td>
<td>Nevada</td>
<td>13</td>
<td>A-</td>
</tr>
<tr>
<td>Arkansas</td>
<td>41</td>
<td>F</td>
<td>New Hampshire</td>
<td>21</td>
<td>C+</td>
</tr>
<tr>
<td>California</td>
<td>1</td>
<td>A+</td>
<td>New Jersey</td>
<td>9</td>
<td>A-</td>
</tr>
<tr>
<td>Colorado</td>
<td>19</td>
<td>C+</td>
<td>New Mexico</td>
<td>12</td>
<td>A-</td>
</tr>
<tr>
<td>Connecticut</td>
<td>3</td>
<td>A</td>
<td>New York</td>
<td>10 (tie)</td>
<td>A-</td>
</tr>
<tr>
<td>Delaware</td>
<td>22</td>
<td>C</td>
<td>North Carolina</td>
<td>30</td>
<td>F</td>
</tr>
<tr>
<td>District of Columbia</td>
<td>No Rank</td>
<td>No Grade</td>
<td>North Dakota</td>
<td>48</td>
<td>F</td>
</tr>
<tr>
<td>Florida</td>
<td>27</td>
<td>F</td>
<td>Ohio</td>
<td>37</td>
<td>F</td>
</tr>
<tr>
<td>Georgia</td>
<td>29</td>
<td>F</td>
<td>Oklahoma</td>
<td>43</td>
<td>F</td>
</tr>
<tr>
<td>Hawaii</td>
<td>4</td>
<td>A</td>
<td>Oregon</td>
<td>6</td>
<td>A</td>
</tr>
<tr>
<td>Idaho</td>
<td>32</td>
<td>F</td>
<td>Pennsylvania</td>
<td>33</td>
<td>F</td>
</tr>
<tr>
<td>Illinois</td>
<td>15</td>
<td>B</td>
<td>Rhode Island</td>
<td>24</td>
<td>D+</td>
</tr>
<tr>
<td>Indiana</td>
<td>36</td>
<td>F</td>
<td>South Carolina</td>
<td>31</td>
<td>F</td>
</tr>
<tr>
<td>Iowa</td>
<td>20</td>
<td>C+</td>
<td>South Dakota</td>
<td>47</td>
<td>F</td>
</tr>
<tr>
<td>Kansas</td>
<td>46</td>
<td>F</td>
<td>Tennessee</td>
<td>28</td>
<td>F</td>
</tr>
<tr>
<td>Kentucky</td>
<td>34</td>
<td>F</td>
<td>Texas</td>
<td>39 (tie)</td>
<td>F</td>
</tr>
<tr>
<td>Louisiana</td>
<td>50</td>
<td>F</td>
<td>Utah</td>
<td>35</td>
<td>F</td>
</tr>
<tr>
<td>Maine</td>
<td>8</td>
<td>A</td>
<td>Vermont</td>
<td>7</td>
<td>A</td>
</tr>
<tr>
<td>Maryland</td>
<td>5</td>
<td>A</td>
<td>Virginia</td>
<td>42</td>
<td>F</td>
</tr>
<tr>
<td>Massachusetts</td>
<td>16</td>
<td>B-</td>
<td>Washington</td>
<td>2</td>
<td>A+</td>
</tr>
<tr>
<td>Michigan</td>
<td>44</td>
<td>F</td>
<td>West Virginia</td>
<td>17</td>
<td>B-</td>
</tr>
<tr>
<td>Minnesota</td>
<td>18</td>
<td>C+</td>
<td>Wisconsin</td>
<td>25</td>
<td>D+</td>
</tr>
<tr>
<td>Mississippi</td>
<td>49</td>
<td>F</td>
<td>Wyoming</td>
<td>23</td>
<td>D+</td>
</tr>
<tr>
<td>Missouri</td>
<td>45</td>
<td>F</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NATIONWIDE GRADE:** D

[Visit NARAL Pro-Choice America](https://www.naral.org)
# TABLE OF CONTENTS

## PREFACE

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dedication</td>
<td>ii</td>
</tr>
<tr>
<td>From the President</td>
<td>iii</td>
</tr>
<tr>
<td>Visit the Web</td>
<td>iv</td>
</tr>
</tbody>
</table>

## INTRODUCTION

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Key Findings: Pro-Choice Policy</td>
<td>2</td>
</tr>
<tr>
<td>Key Findings: Threats to Choice</td>
<td>4</td>
</tr>
<tr>
<td>Key Findings: Political Landscape</td>
<td>6</td>
</tr>
</tbody>
</table>

## FAST FACTS

### FAST FACTS ABOUT ANTI-CHOICE LAWS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abortion Bans Throughout Pregnancy</td>
<td>10</td>
</tr>
<tr>
<td>Biased Counseling and Mandatory Delays</td>
<td>11</td>
</tr>
<tr>
<td>Counseling Bans and Gag Rules</td>
<td>12</td>
</tr>
<tr>
<td>Insurance Prohibition for Abortion</td>
<td>13</td>
</tr>
<tr>
<td>Near-Total Abortion Bans</td>
<td>14</td>
</tr>
<tr>
<td>Refusal to Provide Medical Services</td>
<td>15</td>
</tr>
<tr>
<td>Restrictions on Low-Income Women’s Access to Abortion</td>
<td>16</td>
</tr>
<tr>
<td>Restrictions on Young Women’s Access to Abortion</td>
<td>17</td>
</tr>
<tr>
<td>Support for Crisis Pregnancy Centers</td>
<td>18</td>
</tr>
<tr>
<td>Targeted Regulation of Abortion Providers (TRAP)</td>
<td>19</td>
</tr>
</tbody>
</table>

### FAST FACTS ABOUT PRO-CHOICE LAWS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Contraception (EC)</td>
<td>22</td>
</tr>
<tr>
<td>Freedom of Choice Acts (FOCA)</td>
<td>23</td>
</tr>
<tr>
<td>Guaranteed Access to Prescriptions (GAP)</td>
<td>24</td>
</tr>
<tr>
<td>Insurance Coverage for Abortion</td>
<td>25</td>
</tr>
<tr>
<td>Insurance Coverage for Contraception</td>
<td>26</td>
</tr>
<tr>
<td>Low-Income Women’s Access to Family Planning</td>
<td>27</td>
</tr>
<tr>
<td>Protection Against Clinic Violence</td>
<td>28</td>
</tr>
<tr>
<td>State Constitutional Protection</td>
<td>29</td>
</tr>
</tbody>
</table>

## STATE PROFILES

### 31

## CONCLUSION

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Methodology</td>
<td>84</td>
</tr>
<tr>
<td>Acknowledgments and Disclaimer</td>
<td>87</td>
</tr>
<tr>
<td>NARAL Pro-Choice America State Affiliates</td>
<td>88</td>
</tr>
<tr>
<td>Mission Statements</td>
<td>90</td>
</tr>
</tbody>
</table>
DEDICATION

NARAL Pro-Choice America and NARAL Pro-Choice America Foundation dedicate the 2015 edition of Who Decides? The Status of Women’s Reproductive Rights in the United States to all the women who have persevered in seeking abortion care in the face of overwhelming anti-choice restrictions.

Anti-choice politicians are working systematically to dismantle women’s access to abortion services. Despite these roadblocks, women seeking abortion care continue to exercise their constitutional right to choose. They bravely seek out abortion providers despite social stigma, severe restrictions, and even anti-choice violence. These courageous women surmount substantial barriers to make the best decision for themselves and their families.

For their courage and determination, NARAL Pro-Choice America and NARAL Pro-Choice America Foundation are proud to dedicate this year’s edition of Who Decides? to the women who fearlessly stand up and fight for their rights.

• • •

IN MEMORY OF GARY JONAS

NARAL Pro-Choice America and NARAL Pro-Choice America Foundation also dedicate the 2015 edition of Who Decides? The Status of Women’s Reproductive Rights in the United States to the memory of Gary Jonas. Mr. Jonas was the loving husband of Rosalyn Levy Jonas, former board chair of NARAL Pro-Choice America and NARAL Pro-Choice America Foundation. He was a lifelong champion for social justice and women’s equality, a fierce and proud supporter of pro-choice values, and we mourn his loss deeply. He leaves a legacy of philanthropy and progressive social change that inspires us every day.
2014 was a monumental year for attacks on reproductive rights. Anti-choice state legislators led the pack, enacting 27 anti-choice measures—from outright abortion bans to mandatory waiting periods. But it wasn’t just anti-choice-dominated state legislatures that worked actively to block reproductive freedom this year. Courts also continue to play a significant role in deciding the fates of women.

This year, the Supreme Court struck down a law protecting patients and health-care providers entering abortion clinics. The court also sided with corporations in saying their employees need their bosses’ permission to get birth-control coverage in their insurance plans. All across the country, people are waking up to a new reality shaped by anti-choice politicians and ideologically motivated judges and justices who believe they know better than women, our families, and our doctors about what’s best for us.

And across massive swaths of America, especially in the South, women’s health clinics are closing as punitive, politically motivated laws targeting abortion facilities take effect. These TRAP (targeted regulation of abortion providers) laws, include requirements like dictating the size of a janitor’s closet, the number of parking spaces, or whether there’s grass outside the health center. For too many women, the reality of getting abortion services now includes traveling hundreds of miles, taking time off work, making multiple visits to a doctor, and finding child care, all while coming up with the money to cover transportation and lodging.

Laws requiring waiting periods, forced ultrasounds, and medically inaccurate lectures prior to receiving abortion services put more roadblocks between women and the care they need. What’s more, they send a message to women that we are somehow incapable of making these decisions on our own and that we need politicians to tell us what to do with our own bodies.

While the overall picture for women may look bleak, there is a silver lining. One consequence of these anti-choice trends is a growing and vocal backlash against these assaults and the legislators who promote them. Polling consistently shows—including research NARAL Pro-Choice America conducted this summer—that seven out of 10 registered voters believe abortion should be legal. This number crosses generational, ethnic, geographic, and even partisan boundaries.

As the anti-choice movement tries to impose its agenda, we are starting to see a shift in the momentum. Just one indication includes political candidates across the ideological spectrum reassuring voters that they will protect women’s rights—even when it contradicts their records. As this trend grows, we will see the results not just in elections but in law, including proactive legislation that not only protects a woman’s right to legal abortion, but expands it.

As always, Who Decides? is a critical tool for anyone who wants to make a difference in the fight for our rights. I find in my own work as president that I constantly keep this book close at hand. I hope you will too, and that it helps you in our shared goal to ensure that women everywhere have both the rights and the resources to have the lives and families they choose.

Sincerely,

Ilyse G. Hogue
President
WHO DECIDES? ONLINE FEATURES:

- Summaries of measures across the country affecting reproductive rights—including detailed descriptions, citations, and information on relevant court cases.

- Updates to our Fast Facts pages, statute summaries, maps and charts, and other features as new laws are enacted and court cases are decided.

- Infographics highlighting the dangerous trends and new threats posed by anti-choice measures around the country.

- Opportunities to take action to protect and expand reproductive freedom in your state.

You can visit Who Decides? online to dig into our frequently updated state-by-state analysis of the status of women’s reproductive rights, browse the stats for the year in choice, and download a complete PDF of the book.
INTRODUCTION
NARAL Pro-Choice America and NARAL Pro-Choice America Foundation support a wide range of pro-choice policies that help protect every woman’s right to make reproductive choices, including preventing unintended pregnancy, bearing healthy children, and choosing safe, legal abortion.

In 2014, more pro-choice measures were enacted than any year since 2008. Policymakers are realizing what the public majority already knows: that protecting a woman’s right to comprehensive reproductive-health care is the right thing to do.

TOTAL PRO-CHOICE STATE MEASURES ENACTED IN 2014:

- 17 states and the District of Columbia enacted 22 pro-choice measures in 2014.
- Once again, California enacted more pro-choice legislation than any other state in 2014, with three measures.
- Maryland and Massachusetts enacted the second-highest number of pro-choice measures in 2014, with two measures.

KEY PRO-CHOICE VICTORIES IN 2014:

- The California Department of Managed Health Care determined that any insurance plans that eliminate coverage, or place limits on coverage of abortion care, run afoul of state law and the California constitution, effectively requiring coverage of abortion by all plans in the state. This is the first such policy in the nation and stands in stark contrast to the 26 states that ban abortion coverage, either in their health-insurance exchange or in the entire statewide private insurance market.
- California also enacted a measure strengthening the Affordable Care Act’s contraceptive-coverage policy, ensuring that health-insurance plans cover without copay all FDA-approved contraceptive products. This law marks another first-in-the-nation win for reproductive-health care.
- Massachusetts enacted a new clinic-protection law limiting anti-choice harassment and violence outside reproductive-health clinics. The law was approved a month after the U.S. Supreme Court struck down Massachusetts’ 35-foot clinic-buffer zone.
- New Hampshire lawmakers, also concerned with clinic violence, enacted a law that provides a buffer zone of up to 25 feet around reproductive-health clinics.
- Vermont repealed its unconstitutional and unenforceable pre-Roe ban on abortion care.
- Maryland and Massachusetts approved laws that prohibit shackling of incarcerated pregnant women.
- Minnesota enacted the Women’s Economic Security Act which, among other things, promotes healthy childbearing, prohibits pregnancy- and childbirth-related discrimination, and improves pregnancy and parenting leave policies.

PRO-CHOICE LOCAL MEASURES ENACTED IN 2014:

- The Seattle city council approved unanimously a resolution calling on Congress to lift all bans on abortion coverage, including the Hyde amendment, so that every woman, whatever her income level, can get affordable, safe abortion care.
- San Francisco updated and improved its clinic-protection law.

KEY FINDINGS: Pro-Choice Policy

1 This report uses “laws” to refer specifically to statutes adopted by the legislature or enacted by ballot measure. “Measures” is a broader term that includes the following: constitutional provisions, statutes, regulations, court decisions, ballot measures, opinions of state attorneys general, state policies, and other governmental actions with statewide effect.
CUMULATIVE NUMBER OF STATEWIDE PRO-CHOICE MEASURES ENACTED SINCE 2004 *

* Note: Chart includes only state measures—not local ordinances.

STATES THAT ENACTED PRO-CHOICE MEASURES IN 2014

ProChoiceAmerica.org | ProChoiceAmericaFDN.org

WHO DECIDES? 2015
KEY FINDINGS: Threats to Choice

In the 2010 elections, anti-choice politicians seized control of many state legislatures, vowing to focus on the nation’s economic challenges. Once elected, however, these same lawmakers abandoned their promises and instead launched a War on Women. Now, for the fourth straight year, women have paid the price for this bait-and-switch strategy as anti-choice lawmakers restricted further the right to choose.

Among the 27 anti-choice state measures enacted in 2014, the most prominent trends were: TRAP laws, mandatory delays, and insurance-coverage bans.

**CUMULATIVE NUMBER OF STATEWIDE ANTI-CHOICE MEASURES ENACTED SINCE 1995**

*Note: Chart includes only state measures—not local ordinances.*

1 In late 2013, one state enacted one additional measure that was not captured in last year’s publication.

**STATES THAT ENACTED ANTI-CHOICE MEASURES IN 2014**
TOTAL ANTI-CHOICE STATE MEASURES ENACTED IN 2014:

• 16 states enacted 27 anti-choice measures in 2014.
• Louisiana enacted the most anti-choice legislation in 2014, with four measures. Alabama, Florida, Indiana, Kansas, Missouri, Oklahoma, South Dakota, and Virginia each enacted two anti-choice measures.
• Since 1995, states have enacted 835 anti-choice measures.

ANTI-CHOICE STATE MEASURES ENACTED IN 2014 INCLUDED:

• Indiana, Louisiana, and Oklahoma imposed onerous regulations on abortion providers that are intended to force clinics out of practice. In addition to the extensive requirements to which providers are already subject, each of these states now requires that all physicians providing abortion services must have admitting privileges at a local hospital, a near impossibility when nothing in the law requires hospitals to grant such privileges.
• The Missouri legislature overrode the governor’s veto and enacted a law forcing women to wait 72 hours before getting abortion services, worsening an already burdensome 24-hour mandatory delay. Similarly, Alabama extended its 24-hour mandatory-delay law to 48 hours. Mandatory delays create extreme burdens for many women, especially those in rural areas who must often travel long distances to reach a health-care provider, or women who simply do not have the resources to take extra time off work or pay for child care and out-of-town lodging.
• Two states—Indiana and Georgia—enacted abortion-coverage bans. Georgia’s measure bans coverage of abortion in the state’s health-insurance exchange and permanently blocks coverage for public employees, codifying a de facto prohibition on coverage in the state employee insurance plan. Indiana extended its existing ban on coverage within the state’s exchange to apply statewide, banning coverage in the entire private market.
• Mississippi enacted a ban on abortion care after 20 weeks.
• South Dakota enacted a law banning abortion for sex-selection purposes, holding doctors criminally liable for knowing the reasons a woman chooses to end a pregnancy.
• Oklahoma enacted a forced-ultrasound law that requires a woman seeking abortion care first to undergo an ultrasound procedure that neither she wants nor her doctor recommends. Additionally, the law requires doctors to use an outdated regimen for non-surgical abortion care, forbidding them from prescribing the medication off-label, a widely used practice in other areas of medicine.
• Florida narrowed the health exception in its existing post-viability abortion ban.
• Missouri enacted a law expanding direct funding to crisis pregnancy centers, anti-choice organizations whose sole purpose is to block women from exercising their right to choose.
• Alabama enacted a law restricting young women’s access to abortion.
• Voters in Tennessee approved a ballot measure that amends the state’s constitution and allows elected officials to impose new restrictions on abortion rights. Amendment 1 makes it so that if Roe v. Wade were ever overturned, the Tennessee Supreme Court would have no authority to keep abortion legal in the state.

ANTI-CHOICE LOCAL MEASURES ENACTED IN 2014:

• Portland, ME repealed an ordinance that placed a buffer zone around an abortion provider in that city.
• Three municipalities—Burlington, VT, Madison, WI, and San Francisco—stopped enforcing their buffer-zone ordinances, citing the U.S. Supreme Court decision McCullen v. Coakley.
KEY FINDINGS: Political Landscape

CHOICE POSITIONS OF EXECUTIVES:
Federal Government
- President Barack Obama is pro-choice.
- Vice President Joe Biden is mixed-choice.

Governors¹
- 13 governors and the mayor of the District of Columbia are pro-choice: CA, CO, CT, DC, HI, MN, MT, NH, NY, OR, PA, RI, VA, WA.
- 8 governors are mixed-choice: DE, IL, KY, MD, MA, MO, NV, WV.
- 28 governors are anti-choice: AL, AK, AZ, AR, FL, GA, ID, IN, IA, KS, LA, ME, MI, MS, NE, NJ, NM, NC, ND, OH, OK, SC, SD, TN, TX, UT, WI, WY.

CHOICE POSITIONS OF LEGISLATURES:
U.S. Congress
- The choice composition of the U.S. Senate is:
  - 37 pro-choice senators
  - 9 mixed-choice senators
  - 54 anti-choice senators

- The choice composition of the U.S. House is²:
  - 166 pro-choice members
  - 22 mixed-choice members
  - 246 anti-choice members

State Legislatures
- Legislatures that are anti-choice outnumber pro-choice legislatures:
  - 8 states and the District of Columbia have pro-choice legislatures (both the house and senate are pro-choice): CA, CT, DC (city council), HI, MD, MA, NJ, OR, VT.
  - 25 states have anti-choice legislatures (both the house and senate are anti-choice): AL, AK, AR, AZ, FL, ID, IN, KS, KY, LA, MI, MS, MO, NE, NC, ND, OH, OK, SD, TN, TX, UT, VA, WV, WI.
- Choice composition of state senates³:
  - 12 states and the District of Columbia have a pro-choice senate: CA, CT, DC (city council), HI, IL, IA, MD, MA, MN, NJ, NM, OR, VT.

¹ As of December 6, 2014, the final outcome was pending in 1 race for governor.
² As of December 6, 2014, the final outcome was pending in 1 race for the U.S. House of Representatives.
³ The terms “house” and “senate” include the equivalent bodies in states that have different titles for their state legislative bodies. Nebraska has a unicameral body that is counted as a senate, and the District of Columbia’s city council—for this purpose—is counted as a senate.
• 10 states have a mixed-choice senate: CO, DE, ME, MT, NV, NH, PA, SC, WA, WY.
• 28 states have an anti-choice senate: AL, AK, AZ, AR, FL, GA, ID, IN, KS, KY, LA, MI, MS, MO, NE, NY, NC, ND, OH, OK, RI, SD, TN, TX, UT, VA, WV, WI.

Choice composition of state houses:
• 12 states have a pro-choice house: CA, CO, CT, HI, ME, MD, MA, NJ, NY, OR, VT, WA.
• 7 states have a mixed-choice house: DE, GA, IL, NV, NH, NM, RI.
• 30 states have an anti-choice house: AL, AK, AZ, AR, FL, ID, IN, IA, KS, KY, LA, MI, MS, MO, MT, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, VA, WV, WI, WY.

Choice Positions of State Governments
• 4 states and the District of Columbia have pro-choice governments (both a majority of the legislature and the governor are pro-choice): CA, CT, DC (mayor and city council), HI, OR.
• 21 states have anti-choice governments (both a majority of the legislature and the governor are anti-choice): AL, AK, AZ, AR, FL, ID, IN, KS, LA, MI, MS, NE, NC, ND, OH, OK, SD, TN, TX, UT, WI.

### Choice Positions in the States

<table>
<thead>
<tr>
<th></th>
<th>Pro-Choice</th>
<th>Mixed Choice</th>
<th>Anti-Choice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governor</td>
<td>14*</td>
<td>8</td>
<td>28</td>
</tr>
<tr>
<td>Senate*</td>
<td>13*</td>
<td>10</td>
<td>28</td>
</tr>
<tr>
<td>House</td>
<td>12</td>
<td>7</td>
<td>30</td>
</tr>
</tbody>
</table>

* Including the mayor and city council of the District of Columbia.
FAST FACTS ABOUT ANTI-CHOICE LAWS
Abortion Bans Throughout Pregnancy

Q: Have politicians succeeded in making abortion illegal in some cases?

A: YES. In 2003, Congress passed and the president signed the Federal Abortion Ban, and the Supreme Court ruled it constitutional in Gonzales v. Carhart. That ban outlaws certain safe, medically appropriate abortion care often necessary to protect a woman’s health as early as the 12th week of pregnancy. While the Federal Abortion Ban applied nationwide, the court’s decision also gave states the green light to enact further bans and other restrictions on abortion that disregard women’s health.

Sadly, we have seen this exact scenario play out: in 2010 Nebraska enacted the very first ban on abortion after 20 weeks, with no exception to protect a woman’s health; many other states quickly followed suit. Anti-choice politicians have since grown even bolder by banning abortion earlier and earlier in pregnancy (see also: Near-Total Abortion Bans). These bans are part of an alarming, coordinated effort to lure the Supreme Court into dismantling the protections established by Roe v. Wade.

ABORTION BANS BY WEEK:
Bans abortion at a certain week of pregnancy

<table>
<thead>
<tr>
<th>CURRENT STATE MEASURES</th>
<th>13 states ban abortion after 20 weeks without an adequate health exception: AL, AZ*, AR, GA, ID, IN, KS, LA, MS, NE, ND, OK, TX.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 state has an unconstitutional and unenforceable ban on abortion after 12 weeks without an adequate health exception: AR*.</td>
</tr>
<tr>
<td></td>
<td>* Note: Both Arizona’s and Arkansas’ law are written in such a way that they could apply two weeks earlier than is written in the statute.</td>
</tr>
</tbody>
</table>

| 2014 ENACTED STATE MEASURES | 1 state enacted 1 ban on abortion after 20 weeks without an adequate health exception: MS. |

ABORTION BANS BY PROCEDURE:
Bans a type of abortion procedure

<table>
<thead>
<tr>
<th>CURRENT STATE MEASURES</th>
<th>20 states have unconstitutional and unenforceable procedure bans that could outlaw abortion as early as the 12th week of pregnancy, with no exception to protect a woman’s health: AL, AK, FL, ID, IL, IN, IA, KY, MI, MS, NE, NJ, ND, OK, RI, SC, SD, TN, WV, WI.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>9 states ban a safe abortion procedure with no health exception: AZ, AR, KS, LA, MI, MO, NH, UT, VA.</td>
</tr>
<tr>
<td></td>
<td>1 state bans a safe abortion procedure with only a narrow health exception: OH.</td>
</tr>
</tbody>
</table>
Biased Counseling and Mandatory Delays

Q: What are biased-counseling and mandatory-delay measures, and how do they endanger women’s health?

A: Biased-counseling and mandatory-delay measures prohibit women from receiving abortion care until they are subjected to a state-mandated lecture and/or materials, typically followed by a delay of at least 24 hours. Like any patient, a woman considering abortion should receive full and unbiased information from her doctor about her medical options. However, these measures require that women be provided with political propaganda and medically inaccurate information, such as the disproven claim that abortion causes breast cancer. Mandatory delays create additional burdens for women, especially women in rural areas who often have to travel for many hours to reach a health-care provider, and women who do not have the resources to take extra time off work or pay for child care. Biased-counseling measures are insulting to women, implying they are not capable of making decisions for themselves, and insert politicians intrusively into the doctor-patient relationship.

CURRENT STATE MEASURES

33 states have measures that subject women seeking abortion services to biased-counseling requirements and/or mandatory delays: AL, AK, AZ, AR, DE, FL, GA, ID, IN, KS, KY, LA, MA, MI, MN, MS, MO, MT, NE, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WV, WI.

7 of these measures have been found fully or partially unconstitutional: DE, KY, MA, MI, MT, SD, TN.

2014 ENACTED STATE MEASURES

3 states enacted 3 measures related to biased counseling and/or mandatory delays: AL, LA, MO.
Counseling Bans and Gag Rules

Q: What are counseling bans and gag rules, and how do they impede women’s access to health care?

A: To make informed health-care decisions, patients must have access to full, complete, and accurate information about their options. Women seeking reproductive-health care are no different. Counseling bans, also known as gag rules, typically prohibit organizations that receive state and/or federal funds from counseling or referring women for abortion services, hinder doctors from treating their patients responsibly, and severely limit women’s ability to make informed choices.

<table>
<thead>
<tr>
<th>CURRENT STATE MEASURES</th>
<th>21 states have measures that prohibit some or all state employees or organizations that receive state funds from providing, counseling, or referring women for abortion services: AL, AZ, AR, IL, IN, KS, KY, LA, MI, MN, MS, MO, NE, ND, OH, OK, PA, SC, TX, VA, WI.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>■ 1 state prohibition has been held partially unconstitutional: ND.</td>
</tr>
</tbody>
</table>

| 2014 ENACTED STATE MEASURES | 1 state enacted 1 measure that prohibits organizations or individuals associated with abortion providers from offering any education or information to students at public or charter schools: LA. |

This information is current as of November 5, 2014. For updated information, including summaries of all referenced measures, please visit www.WhoDecides.org.
Insurance Prohibition for Abortion

Q: What are bans on insurance coverage for abortion, and how do they restrict women’s privacy and choices?

A: Anti-choice legislators have enacted measures that prohibit insurance companies from covering abortion services or require women to purchase a separate policy and pay an extra premium to receive abortion coverage. Offering women the “option” to pay extra for supplemental abortion coverage, often known as a rider, is a false promise because no one plans for an unplanned pregnancy, and furthermore, there is no evidence that such separate abortion policies exist. These prohibitions can be especially damaging because their existence often isn’t known until a woman needs coverage that she assumes is already included in her health plan.

CURRENT STATE MEASURES

- 29 states prohibit insurance plans from covering abortion services for all or some residents of the state: AL, AZ, AR, CO, FL, GA, ID, IL, IN, KS, KY, LA, MA, MI, MS, MO, NE, NC, ND, OH, OK, PA, RI, SC, SD, TN, UT, VA, WI.
  - 11 states prohibit abortion coverage in the entire private insurance market: ID, IN, KS, KY, MI, MO, NE, ND, OK, RI, UT.
  - 23 states expressly prohibit abortion coverage in state insurance exchanges: AL, AZ, AR, FL, GA, ID, IN, KS, LA, MI, MS, MO, NE, NC, OH, OK, PA, SC, SD, TN, UT, VA, WI.
  - 17 states prohibit abortion coverage for public employees: AZ, AR, CO, GA, IL, KS, KY, MA, MI, MS, NE, NC, OH, PA, RI, SC, VA.

2014 ENACTED STATE MEASURES

- 1 state enacted 1 measure prohibiting abortion coverage in the entire private insurance market: IN.
- 1 state enacted 1 measure prohibiting abortion coverage in its state insurance exchange: GA.
- 1 state enacted 1 measure prohibiting abortion coverage for public employees: GA.

This information is current as of November 5, 2014. For updated information, including summaries of all referenced measures, please visit www.WhoDecides.org.

ProChoiceAmerica.org | ProChoiceAmericaFDN.org

WHO DECIDES? 2015 13
Near-Total Abortion Bans

Q: Are politicians really trying to outlaw abortion care altogether?

A: YES. If Roe v. Wade were overturned, it would open the door for anti-choice lawmakers in state and federal governments to enact and enforce laws banning abortion. In fact, some states already have abortion bans on the books, either from before Roe or because they enacted laws after Roe hoping to prompt the Supreme Court to overturn it. Currently, these bans are unenforceable; however, if Roe were overturned they would become enforceable immediately. Still other states have anti-choice legislatures and governors likely to enact abortion bans if Roe were overturned.

Additionally, some states are enacting laws that ban abortion earlier and earlier in pregnancy. In 2013, North Dakota went the furthest, enacting a “heartbeat” law that makes abortion illegal as early as six weeks. This law is a de facto near-total ban: had it been allowed to take effect, it would have banned abortion before many women even know they are pregnant.


current state measures

13 states have unconstitutional and unenforceable near-total criminal bans on abortion: AL, AZ, AR, DE, LA, MA, MI, MS, ND, NM, OK, WV, WI.
- 2 of these bans were enacted after Roe v. Wade: LA, ND.
4 states have laws that would impose near-total criminal bans on abortion if the Supreme Court overturns Roe v. Wade (sometimes known as “trigger” bans): LA, MS, ND, SD.

This information is current as of November 5, 2014. For updated information, including summaries of all referenced measures, please visit www.WhoDecides.org.
Refusal to Provide Medical Services

Q: Are health-care providers really allowed to refuse to provide medically necessary services?

A: YES. A number of state and federal laws include provisions known as “refusals,” which permit a broad range of individuals and institutions—including hospitals, health-care providers, pharmacists, employers, and insurance companies—to refuse to provide, pay for, counsel for, or even refer patients for medical treatment. Unsurprisingly, in these measures, anti-choice lawmakers often target abortion care. Although carefully crafted refusal measures may be acceptable in some circumstances to protect individuals who oppose certain treatments, broad refusal measures deny women medically necessary information, referrals, and services. In addition, even if individual medical providers are protected, health-care corporations should not be allowed broadly to deny women access to necessary medical services and information.

CURRENT STATE MEASURES

47 states and the District of Columbia allow certain individuals or institutions to refuse to provide women specific reproductive-health services, information, or referrals*: AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, WA, WV, WI, WY.

2014 ENACTED STATE MEASURES

1 state enacted 2 measures allowing certain individuals or institutions to refuse to provide women specific reproductive-health services, information, or referrals: VA.

* Because some refusal laws do not explicitly mention reproductive-health services, the process of researching and documenting current measures is ongoing. For the most current list of refusal laws, please see the NARAL Pro-Choice America website, which will be updated as more measures are added.
Restrictions on Low-Income Women’s Access to Abortion

Q: How do restrictions on access to abortion care disproportionately affect low-income women?

A: All women should have access to reproductive-health care, regardless of their economic status; however, discriminatory restrictions on public funding make abortion services an unavailable choice for many low-income women. Banning public funding for certain services unfairly limits reproductive-health options for those who rely on the government for their health care. These policies allow politicians to discriminate against women who receive health insurance through the government and create a two-tiered system of reproductive freedom, with one set of rights for wealthy women and another set for those with lesser means.

**CURRENT STATE MEASURES**

34 states and the District of Columbia restrict low-income women’s access to abortion: AL, AK, AR, CO, DC, DE, FL, GA, ID, IN, IA, KS, KY, LA, ME, MI, MS, MO, NE, NV, NH, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WI, WY.

- 6 of these states fund abortion services for low-income women in extremely limited circumstances beyond federal restrictions: IN, IA, MS, UT, VA, WI.
- 1 of these measures has been found unenforceable: AK.

17 states fund abortion services for low-income women beyond federal restrictions: AK, AZ, CA, CT, HI, IL, MD, MA, MN, MT, NJ, NM, NY, OR, VT, WA, WV.

**2014 ENACTED STATE MEASURES**

1 state enacted 1 measure restricting low-income women’s access to abortion: AK.
Restrictions on Young Women’s Access to Abortion

Q: How are abortion restrictions dangerous to young women’s safety?

A: Most young women talk with at least one parent when facing an unintended pregnancy. But some young women feel for various reasons—including abuse, rape, or incest—that they cannot. Further, placing restrictions on a young woman’s access to abortion can delay her from seeking earlier, safer care, thus putting her health at risk. Of course, most parents hope their daughters will seek out their advice and support, but responsible parents want, above all, for their daughters to be safe.

CURRENT STATE MEASURES

- 44 states have parental-notice or -consent measures that restrict young women’s access to abortion: AL, AK, AZ, AR, CA, CO, DE, FL, GA, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WV, WI, WY.
- 25 states require parental consent: AL, AZ, AR, CA, ID, IN, KS, KY, LA, ME, MA, MI, MS, MO, MT, NE, NM, NC, ND, OH, PA, RI, SC, TN, WI.
- 14 states require parental notice: AK, CO, DE, FL, GA, IL, IA, MD, MN, NV, NH, NJ, SD, WV.
- 5 states require both parental notice and consent: OK, TX, UT, VA, WY.
- 12 states have parental-notice and/or -consent measures that permit other trusted adults to stand in for a parent: AZ, CO, DE, IL, IA, ME, NC, NE, PA, SC, VA, WI.
- 5 of these laws have been found unconstitutional and unenforceable: CA, MT, NV, NJ, NM.

2014 ENACTED STATE MEASURES

- 2 states enacted 2 measures restricting young women’s access to abortion: AL, AZ.

This information is current as of November 5, 2014. For updated information, including summaries of all referenced measures, please visit www.WhoDecides.org.

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
Support for Crisis Pregnancy Centers

Q: What are crisis pregnancy centers and why are they dangerous to women’s health?

A: Crisis pregnancy centers (CPCs) are anti-choice organizations that often pose as comprehensive reproductive-health centers, but whose sole purpose is to block women from exercising their right to choose. CPCs use a variety of tactics to lure women into their centers, including false or misleading advertising and promises of free services. Once inside, CPCs intentionally misinform and mislead women by making claims about the “consequences” of abortion, such as an increased risk of breast cancer and psychological damage. While some CPCs are upfront about their anti-choice agenda and may even provide some support and information to women facing unintended pregnancies, many do not.

While they may seem harmless, CPCs do not operate alone—they are allied with powerful national anti-choice organizations and politicians. Several states fund CPCs directly. Many others refer women to CPCs or even require women to visit a CPC before they can get abortion care. Some anti-choice legislatures also funnel money to CPCs through “Choose Life” license-plate programs.

All patients deserve comprehensive, non-directive, and medically accurate information when seeking medical care. Women seeking pregnancy-related information are no different. Regardless of one’s opinion on legal abortion, everyone should agree that no person seeking medical care or counseling should be manipulated, harassed, or lied to.

CURRENT STATE MEASURES

- 23 states have measures supporting CPCs: AZ, AR, FL, GA, KS, LA, MI, MN, MS, MO, NE, NC, ND, OH, OK, PA, SC, SD, TN, TX, VA, WV, WI.
- 11 states fund CPCs directly*: KS, LA, MI, MN, MO, NC, ND, OH, PA, TX, WI.
- 1 state has 1 unenforceable measure that forces women to go to a CPC: SD.
- 20 states refer women to CPCs: AZ, AR, FL, GA, KS, LA, MN, MS, NE, NC, ND, OH, OK, PA, SC, SD, TX, VA, WV, WI.
- 11 states have “Choose Life” license-plate programs*: AR, FL, GA, LA, MS, NC, OH, OK, SC, TN, TX.
- 1 of these laws is unenforceable: NC.

2014 ENACTED STATE MEASURES

- 2 states enacted 2 measures that support CPCs: MO, SD.
- 1 state enacted 1 measure that funds CPCs directly: MO.
- 1 state enacted 1 measure that makes worse an existing law that forces women to go to a CPC: SD.

* Because this issue area is new to the publication (and the details of budget expenditures are not always publicly available), research is ongoing and additional measures appear here that were not newly enacted in 2014.
Targeted Regulation of Abortion Providers (TRAP)

Q: What are TRAP laws, and how do they impede women’s access to health-care services?

A: The anti-choice movement has undertaken a campaign to impose unnecessary and burdensome regulations on abortion providers—but not other medical professionals—in an obvious attempt to drive doctors out of practice and make abortion care more expensive and difficult to obtain. Such proposals are known as TRAP laws: Targeted Regulation of Abortion Providers. Common TRAP regulations include those that: limit the provision of care only to physicians; force practices to convert needlessly into mini-hospitals at great expense; require abortion providers to get admitting privileges; and require facilities to have a transfer agreement with a local hospital (with nothing requiring hospitals to grant such privileges). Further, in many states abortion care is limited to hospitals or other specialized facilities, rather than physicians’ offices. Anti-choice supporters of TRAP laws assert these are necessary requirements to ensure patient health and safety, but these claims are specious. Legal abortion is an extremely safe procedure. And all types of medical care—abortion included—are already subject to extensive health and safety laws and regulations.

While some TRAP laws have been found legally unenforceable, many TRAP laws have gone into effect and caused clinic closures in several states, severely limiting access to safe and legal abortion care for millions of women. It is clear: the anti-choice movement’s goal is not to protect women’s health; it is to regulate abortion clinics out of existence.

44 states and the District of Columbia have measures subjecting abortion providers to burdensome restrictions not imposed on other medical professionals: AL, AK, AZ, AR, CA, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NE, NV, NJ, NM, NY, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WA, WI, WY.

- All of these states prohibit some qualified health-care professionals from providing abortion care.
- 6 states and the District of Columbia have expanded the scope of practice of advanced-practice clinicians to include medical and/or surgical abortion services: CA, CT, DC, IL, NY, RI, WA.

26 of these states restrict the provision of abortion care—often even in the early stages of pregnancy—to hospitals or other specialized facilities: AK, AR, CT, GA, ID, IN, MA, MN, MS, MO, NV, NJ, NY, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WI.

19 of these laws are at least partially unenforceable: AL, AK, AZ, ID, IL, IN, KS, LA, MA, MS, MO, NY, ND, OH, OK, PA, TN, TX, WI.

4 states enacted 4 measures that subject abortion providers to burdensome restrictions not imposed on other medical professionals: AZ, IN, LA, OK.
FAST FACTS ABOUT PRO-CHOICE LAWS
Emergency Contraception (EC)

Q: What is emergency contraception, and why is it important to women’s health?

A: Emergency contraception (EC), often referred to as the “morning-after” pill, is birth control that can significantly reduce a woman’s chance of becoming pregnant if taken soon after sex. EC can prevent a pregnancy before it occurs; it has no effect on an existing pregnancy. It is not the abortion pill commonly known as RU 486. It may be used when other birth-control methods fail or in cases when birth control is not used, such as when a woman is sexually assaulted. The Food and Drug Administration has approved certain EC medications for over-the-counter sales for individuals of all ages. Unfortunately, many women do not know about the benefits of EC, and anti-choice groups have fought efforts to improve access to it.

<table>
<thead>
<tr>
<th>CURRENT STATE MEASURES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>24</strong> states and the District of Columbia have measures that improve women’s access to EC: AK, AR, CA, CO, CT, DC, HI, IL, ME, MD, MA, MN, NH, NJ, NM, NY, OR, PA, RI, SC, TX, UT, VT, WA, WI.</td>
</tr>
<tr>
<td><strong>18</strong> states and the District of Columbia have measures that improve sexual-assault survivors’ access to EC in hospitals: AR, CA, CO, CT, DC, HI, IL, MA, MN, NJ, NM, NY, OR, PA, SC, TX, UT, WA, WI.</td>
</tr>
<tr>
<td><strong>9</strong> states allow specially trained pharmacists to provide EC to a woman without a prescription: AK, CA, HI, ME, MA, NH, NM, VT, WA.</td>
</tr>
<tr>
<td><strong>6</strong> states provide Medicaid coverage of over-the-counter EC: IL, MD, NM, OR, WA, WI.</td>
</tr>
</tbody>
</table>
Freedom of Choice Acts (FOCA)

Q: What are Freedom of Choice Acts, and why do states need to codify Roe’s protections?

A: In Roe v. Wade, the U.S. Supreme Court ruled that the Constitution guarantees a woman’s right to choose. However, in subsequent decisions the Supreme Court sharply limited some of Roe’s protections and could someday eliminate them entirely.

A Freedom of Choice Act (FOCA) helps ensure that a woman’s right to choose is preserved by making Roe’s protections a permanent part of state or federal law. Women in states with FOCA—s—or women nationwide if Congress were to pass a federal version—would continue to have access to safe, legal abortion care, even if Roe is further eroded or overturned in the courts. However, if the Supreme Court overturned Roe without a FOCA in place, Congress would be able to pass legislation banning abortion nationwide, trumping state codifications of Roe’s protections.

CURRENT STATE MEASURES

7 states have codified a woman’s right to choose, making the protections of Roe v. Wade part of state law: CA, CT, HI, ME, MD, NV, WA.

■ 3 states enacted these measures by ballot initiative: MD, NV, WA.
Guaranteed Access to Prescriptions (GAP)

Q: What can be done about pharmacists who refuse to fill women’s prescriptions for birth control?

A: Measures that guarantee women’s access to prescriptions are becoming increasingly necessary to address the growing issue that some pharmacists refuse to fill women’s legally prescribed birth control. Some pharmacists even go so far as to lecture women, humiliate them at the counter, or refuse to hand back a prescription. When a woman walks into a pharmacy with a birth-control prescription from her doctor, she should walk out with the medication—without intimidation, delay, or harassment.

Current State Measures

- 7 states guarantee that women’s birth-control prescriptions will be filled: CA, IL, ME, NV, NJ, WA, WI.
- 2 states also require pharmacies to dispense over-the-counter emergency contraception: IL, WA.

This information is current as of November 5, 2014. For updated information, including summaries of all referenced measures, please visit www.WhoDecides.org.

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
Insurance Coverage for Abortion

Q: Why is insurance coverage for abortion important to women’s health?

A: All women should have access to abortion care regardless of their income, zip code, or health-insurance plan. However, some insurers object to, or are prohibited from, including coverage of abortion services in their health plans. Singling out abortion care for exclusion from health plans that cover other pregnancy-related care discriminates against women who exercise their right to choose and disproportionately impacts low-income women. Measures that guarantee coverage for abortion services are crucial to ensuring that women have access to safe, comprehensive care.

1 state has 1 measure guaranteeing insurance coverage for abortion services: CA.

1 state enacted 1 measure guaranteeing insurance coverage for abortion services: CA.
Insurance Coverage for Contraception

Q: Why is insurance coverage for contraception important to women’s health?

A: Measures promoting insurance coverage for contraception are crucial to women’s reproductive health. One such policy is known as contraceptive equity: measures that guarantee insurers cover prescription contraception to the same extent as other medications.

Fortunately, under the federal health-care reform law, the Affordable Care Act (ACA), insurance plans must cover women’s family-planning care, including all Food and Drug Administration-approved contraceptive methods, without copayments or deductibles. The nationwide policy goes even further than state contraceptive-equity measures by eliminating cost-sharing requirements. Some states are acting to build upon the federal birth-control policy by requiring that insurers cover an even broader range of contraceptives without cost-sharing. While the federal policy is being fully implemented, these state laws are an important backstop to ensure more robust coverage of contraception.

CURRENT STATE MEASURES

27 states have measures promoting insurance coverage for contraception.

- 27 states ensure equity in private insurance coverage for prescription contraception: AZ, AR, CA, CO, CT, DE, GA, HI, IL, IA, ME, MD, MA, MI, MT, NV, NH, NJ, NM, NY, NC, OR, RI, VT, WA, WV, WI.

- 1 state requires that health-insurance plans cover cost-free each unique contraceptive product: CA.

2014 ENACTED STATE MEASURES

1 state enacted 1 measure to require that health-insurance plans cover cost-free each unique contraceptive product: CA.
Low-Income Women’s Access to Family Planning

Q: How can low-income women get affordable family-planning services?

A: All women should have access to basic reproductive-health care regardless of their income, but the high cost of health care and health insurance puts family-planning services financially out of reach for many. For these women, the Medicaid program is a vital safety net—but many who need Medicaid do not qualify for their state’s program because of limited-eligibility rules.

Traditionally, to try to remedy this problem, states apply for a waiver from the federal government to expand eligibility. Under the Affordable Care Act, now states may submit a State Plan Amendment (SPA) to expand access to their state’s family-planning program under Medicaid permanently. This type of change, as opposed to a waiver subject to continuous review and modification, has the potential to streamline enrollment and reduce administrative costs, making it a better policy option for many states.

28 states, as of October 2014, provided expanded access to Medicaid coverage for family-planning services: AL, CA, CT, FL, GA, IL, IA, IN, LA, MD, MN, MS, MO, MT, NH, NM, NY, NC, OH, OK, OR, PA, RI, SC, VA, WA, WI, WY.

- 15 states provided this coverage through a waiver obtained from the federal government: AL, FL, GA, IL, IA, MD, MN, MS, MO, MT, OR, PA, RI, WA, WY.
- 13 states provided this coverage through a SPA: CA, CT, IN, LA, NH, NM, NY, NC, OH, OK, SC, VA, WI.
- 1 state provided expanded access to coverage for family-planning services through its own state-funded program: TX.

3 states enacted measures expanding access to family planning for low-income women and men: LA, NY, NC.

This information is current as of November 5, 2014. For updated information, including summaries of all referenced measures, please visit www.WhoDecides.org.

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
## Protection Against Clinic Violence

**Q:** Why are specific laws needed to address violence directed at reproductive-health providers and their patients?

**A:** Women and abortion providers’ painful, real-world experiences have shown that general measures prohibiting violence and intimidation do not provide sufficient protection against the unlawful and often violent tactics used by some opponents of choice to harass the patients and staff at health centers. Measures protecting women and providers from violence and intimidation are critical to preserving the right to choose and ensuring that reproductive-health clinics remain operable.

### CURRENT STATE MEASURES

17 states and the District of Columbia have measures that protect health-care facilities, providers, and/or patients from blockades, harassment, and/or other violence: CA, CO, CT, DC, KS, ME, MD, MA, MI, MN, MT, NV, NH, NY, NC, OR, WA, WI.

- 3 of these states have buffer zones that protect patients and clinic personnel from unwanted harassment within specified distances from clinics: CO, MT, NH.
- 1 state buffer zone is not currently enforced: NH.

### 2014 ENACTED STATE MEASURES

2 states enacted 2 measures protecting health-care facilities, providers, and/or patients from blockades, harassment, and/or other violence: MA, NH.

---

*This information is current as of November 5, 2014. For updated information, including summaries of all referenced measures, please visit www.WhoDecides.org.*
State Constitutional Protection

Q: Can a state constitution provide broader protection for the right to choose than the federal Constitution does?

A: YES. Women’s freedom and privacy are protected by the U.S. Constitution, as affirmed by the U.S. Supreme Court in the historic Roe v. Wade decision and other cases. However, an increasingly hostile Supreme Court has allowed more and more restrictions on those rights, allowing politicians and others to infringe on private medical decisions in many ways. Fortunately, a number of state courts have ruled that their state constitutions provide stronger protections for the right to privacy and the right to choose than the U.S. Constitution does. If Roe were overturned, eliminating federal constitutional protection for choice, these states might be able to protect women’s continued access to reproductive-health services unless Congress passed legislation banning abortion nationwide, trum ping state constitutional protections.

15 states’ constitutions provide greater protection of a woman’s right to choose than does the federal Constitution: AK, AZ, CA, CT, FL, IL, IN, MA, MN, MT, NJ, NM, OR, VT, WV.
STATE PROFILES
**ALABAMA**

### Political Information

**EXECUTIVE**
Governor Robert Bentley (R) is *anti-choice*.

**LEGISLATURE**
The Alabama Senate is *anti-choice*.  
The Alabama House is *anti-choice*.

### Laws in Brief

*This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Alabama’s Who Decides? webpage.*

**Anti-Choice Laws**

**ABORTION BANS**
Alabama has criminal bans on abortion.

**BIASED COUNSELING & MANDATORY DELAY**
Alabama law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

**COUNSELING BAN/GAG RULE**
Alabama prohibits certain state employees and organizations receiving state funds from advocating for or promoting abortion services.

**INSURANCE PROHIBITION FOR ABORTION**
Alabama restricts insurance coverage of abortion for some individuals.

**Restrictions on Low-Income Women’s Access to Abortion**
Alabama restricts low-income women’s access to abortion.

**Restrictions on Young Women’s Access to Abortion**
Alabama law restricts young women’s access to abortion services by mandating parental consent.

**Targeted Regulation of Abortion Providers (TRAP)**
Alabama subjects abortion providers to burdensome restrictions not applied to other medical professionals.

**Pro-Choice Laws**

**Low-Income Women’s Access to Family Planning**
Alabama provides certain low-income women increased coverage for Medicaid-funded family-planning services.

**Other Related Laws**

**Post-Viability Abortion Restriction**
Alabama restricts post-viability abortion.

---

**GRADE**

**F**

**ACCESS FACT**

**93 percent** of Alabama counties have no abortion clinic

*Source: Guttmacher Institute*
Political Information

EXECUTIVE
Governor Bill Walker (I) is anti-choice.

LEGISLATURE
The Alaska Senate is anti-choice.
The Alaska House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Alaska’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Alaska has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING
Alaska law subjects women seeking abortion services to biased-counseling requirements.

REFUSAL TO PROVIDE MEDICAL SERVICES
Alaska allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Alaska restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Alaska subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Alaska law improves women’s access to emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Alaska provides low-income women access to abortion.

STATE CONSTITUTIONAL PROTECTION
Alaska’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

ACCESS FACT
90 percent of Alaska counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE

Grade B+

ACCESS FACT
90 percent of Alaska counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
**Political Information**

**EXECUTIVE**
Governor Doug Ducey (R) is anti-choice.

**LEGISLATURE**
The Arizona Senate is anti-choice.
The Arizona House is anti-choice.

**Laws in Brief**

_This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Arizona’s Who Decides? web page._

### Anti-Choice Laws

**ABORTION BANS**
Arizona bans a safe abortion procedure and has unconstitutional and unenforceable criminal bans on abortion.

**BIASED COUNSELING & MANDATORY DELAY**
Arizona law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

**COUNSELING BAN/GAG RULE**
Arizona prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

**CRISIS PREGNANCY CENTERS**
Arizona refers women to CPCs.

**INSURANCE PROHIBITION FOR ABORTION**
Arizona restricts insurance coverage of abortion for some individuals.

**PUBLIC FACILITIES RESTRICTION**
Arizona prohibits the use of some public facilities for abortion services.

### Pro-Choice Laws

**INSURANCE COVERAGE FOR CONTRACEPTION**
Arizona law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

**LOW-INCOME WOMEN’S ACCESS TO ABORTION**
Arizona provides low-income women access to abortion.

**STATE CONSTITUTIONAL PROTECTION**
Arizona’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

### Other Related Laws

**POST-VIABILITY ABORTION RESTRICTION**
Arizona restricts post-viability abortion.
Political Information

EXECUTIVE
Governor Asa Hutchinson (R) is anti-choice.

LEGISLATURE
The Arkansas Senate is anti-choice. The Arkansas House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Arkansas’ Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Arkansas bans a safe abortion procedure and has criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
Arkansas law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Arkansas prohibits certain state employees and organizations receiving state funds from advocating for or promoting abortion services.

CRISIS PREGNANCY CENTERS
Arkansas refers women to CPCs and has a “Choose Life” license-plate program.

INSURANCE PROHIBITION FOR ABORTION
Arkansas restricts insurance coverage of abortion for some individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
Arkansas allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Arkansas restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Arkansas law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Arkansas subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Arkansas law improves women’s access to information about emergency contraception (EC).

INSURANCE COVERAGE FOR CONTRACEPTION
Arkansas law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Arkansas restricts post-viability abortion.

97 percent of Arkansas counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE
Political Information

EXECUTIVE
Governor Jerry Brown (D) is pro-choice.

LEGISLATURE
The California Senate is pro-choice.
The California Assembly is pro-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit California’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
California allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
California has an unconstitutional and unenforceable law that restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
California prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
California law improves women’s access to emergency contraception (EC).

FREEDOM OF CHOICE ACT
California has an affirmative right to choose in its state law.

GUARANTEED ACCESS TO PRESCRIPTIONS
California guarantees that women’s birth-control prescriptions will be filled.

INSURANCE COVERAGE FOR ABORTION
California guarantees insurance coverage of abortion for some individuals.

INSURANCE COVERAGE FOR CONTRACEPTION
California law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
California provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
California provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
California law protects women seeking reproductive-health care and medical personnel from blockades and violence.

STATE CONSTITUTIONAL PROTECTION
California’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

Other Related Laws

INFORMED CONSENT
California has an abortion-specific informed-consent law.

POST-VIABILITY ABORTION RESTRICTION
California restricts post-viability abortion.
Political Information

EXECUTIVE
Governor John Hickenlooper (D) is pro-choice.

LEGISLATURE
The Colorado Senate is mixed-choice. The Colorado House is pro-choice.

Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Colorado’s Who Decides? web page.

Anti-Choice Laws

INSURANCE PROHIBITION FOR ABORTION
Colorado restricts insurance coverage of abortion for some individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
Colorado allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Colorado restricts low-income women’s access to abortion.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Colorado law improves women’s access to information about emergency contraception (EC).

INSURANCE COVERAGE FOR CONTRACEPTION
Colorado law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

PROTECTION AGAINST CLINIC VIOLENCE
Colorado law protects women seeking reproductive-health care and medical personnel from harassment, blockades, and violence.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Colorado law restricts young women’s access to abortion services by mandating parental notice.

78 percent of Colorado counties have no abortion clinic

SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE

NARAL PRO-CHOICE COLORADO
Karen Middleton
Executive Director
1905 Sherman Street
Suite 800
Denver, CO 80203
P: 303.394.1973
www.prochoicecolorado.org
@NARALColorado
Political Information

EXECUTIVE
Governor Dannel Malloy (D) is pro-choice.

LEGISLATURE
The Connecticut Senate is pro-choice. The Connecticut House is pro-choice.

Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Connecticut’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Connecticut allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Connecticut subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Connecticut law improves women's access to emergency contraception (EC).

FREEDOM OF CHOICE ACT
Connecticut has an affirmative right to choose in its state law.

INSURANCE COVERAGE FOR CONTRACEPTION
Connecticut law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Connecticut provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Connecticut provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Connecticut law protects women seeking reproductive-health care and medical personnel from blockades and violence.

STATE CONSTITUTIONAL PROTECTION
Connecticut’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

Other Related Laws

INFORMED CONSENT
Connecticut has an abortion-specific informed-consent law.

POST-VIABILITY ABORTION RESTRICTION
Connecticut restricts post-viability abortion.

YOUNG WOMEN’S ACCESS TO ABORTION
Connecticut requires young women to receive counseling prior to receiving an abortion.
Political Information

EXECUTIVE
Governor Jack Markell (D) is mixed-choice.

LEGISLATURE
The Delaware Senate is mixed-choice.
The Delaware House is mixed-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Delaware’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Delaware has an unconstitutional and unenforceable near-total criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Delaware has a partially unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

REFUSAL TO PROVIDE MEDICAL SERVICES
Delaware allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Delaware restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Delaware law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Delaware prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

INSURANCE COVERAGE FOR CONTRACEPTION
Delaware law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Delaware has an unconstitutional and unenforceable law that restricts post-viability abortion.

33 percent of Delaware counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE
The number of abortion clinics in the District of Columbia increased by 25 percent from 2008 to 2011.

**Source:** Guttmacher Institute

---

## DISTRICT OF COLUMBIA*

### Political Information

**EXECUTIVE**

Mayor Muriel Bowser (D) is pro-choice.

**LEGISLATURE**

The District of Columbia City Council is pro-choice.

### Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit the District of Columbia’s Who Decides? web page.

### Anti-Choice Laws

**REFUSAL TO PROVIDE MEDICAL SERVICES**

The District of Columbia allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

**RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION**

The District of Columbia restricts low-income women’s access to abortion.

**TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)**

The District of Columbia prohibits certain qualified health-care professionals from providing abortion care.

### Pro-Choice Laws

**EMERGENCY CONTRACEPTION**

District of Columbia law improves women’s access to emergency contraception (EC).

**PROTECTION AGAINST CLINIC VIOLENCE**

The District of Columbia protects women seeking reproductive-health care and medical personnel from blockades and violence.

---

* Because Congress routinely interferes with the District of Columbia’s local abortion-related policy, no local grade is given.
FLORIDA

Political Information

EXECUTIVE
Governor Rick Scott (R) is anti-choice.

LEGISLATURE
The Florida Senate is anti-choice.
The Florida House is anti-choice.

Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Florida’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Florida has unconstitutional and unenforceable criminal bans on abortion.

BIASED COUNSELING
Florida law subjects women seeking abortion services to biased-counseling requirements.

CRISIS PREGNANCY CENTERS
Florida refers women to CPCs and has a “Choose Life” license-plate program.

INSURANCE PROHIBITION FOR ABORTION
Florida restricts insurance coverage of abortion for some individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
Florida allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Florida restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Florida law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Florida subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Florida provides certain low-income women increased coverage for Medicaid-funded family-planning services.

STATE CONSTITUTIONAL PROTECTION
Florida’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Florida restricts post-viability abortion.

73 percent of Florida counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
WHO DECIDES? 2015
GRADE F
ACCESS FACT
**Political Information**

**EXECUTIVE**
Governor Nathan Deal (R) is \textit{anti-choice}.

**LEGISLATURE**
The Georgia Senate is \textit{anti-choice}.
The Georgia House is \textit{mixed-choice}.

**Laws in Brief**
\textit{This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Georgia’s Who Decides? web page.}

**Anti-Choice Laws**

**ABORTION BANS**
Georgia has criminal bans on abortion.

**BIASED COUNSELING & MANDATORY DELAY**
Georgia law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

**CRISIS PREGNANCY CENTERS**
Georgia refers women to CPCs and has a “Choose Life” license-plate program.

**INSURANCE PROHIBITION FOR ABORTION**
Georgia restricts insurance coverage of abortion for some individuals.

**REFUSAL TO PROVIDE MEDICAL SERVICES**
Georgia allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

**Pro-Choice Laws**

**INSURANCE COVERAGE FOR CONTRACEPTION**
Georgia law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

**LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING**
Georgia provides certain low-income women increased coverage for Medicaid-funded family-planning services.

**Other Related Laws**

**POST-VIABILITY ABORTION RESTRICTION**
Georgia restricts post-viability abortion.
Political Information

EXECUTIVE
Governor David Ige (D) is pro-choice.

LEGISLATURE
The Hawaii Senate is pro-choice.
The Hawaii House is pro-choice.

Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Hawaii’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Hawaii allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Hawaii prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Hawaii law improves women’s access to emergency contraception (EC).

FREEDOM OF CHOICE ACT
Hawaii has an affirmative right to choose in its state law.

INSURANCE COVERAGE FOR CONTRACEPTION
Hawaii law requires health-insurance plans to provide coverage for prescription contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Hawaii provides low-income women access to abortion.

GRADE

A

ACCESS FACT

40 percent of Hawaii counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE
**Political Information**

**EXECUTIVE**
Governor Clement Leroy “Butch” Otter (R) is anti-choice.

**LEGISLATURE**
The Idaho Senate is anti-choice.
The Idaho House is anti-choice.

**Laws in Brief**
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Idaho’s Who Decides? web page.

**Anti-Choice Laws**

**ABORTION BANS**
Idaho has criminal bans on abortion.

**BIASED COUNSELING & MANDATORY DELAY**
Idaho law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

**INSURANCE PROHIBITION FOR ABORTION**
Idaho restricts insurance coverage of abortion for all individuals.

**REFUSAL TO PROVIDE MEDICAL SERVICES**
Idaho allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

**RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION**
Idaho restricts low-income women’s access to abortion.

**RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION**
Idaho restricts young women’s access to abortion services by mandating parental consent.

**TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)**
Idaho prohibits certain qualified health-care professionals from providing abortion care and has an unconstitutional and unenforceable law that subjects abortion providers to burdensome restrictions not applied to other medical professionals.

**Other Related Laws**

**POST-VIABILITY ABORTION RESTRICTION**
Idaho has an unconstitutional and unenforceable law restricting post-viability abortion.
ILLINOIS

Political Information
EXECUTIVE
Governor Bruce Rauner (R) is mixed-choice.

LEGISLATURE
The Illinois Senate is pro-choice.
The Illinois House is mixed-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Illinois’ Who Decides? web page.

Anti-Choice Laws
ABORTION BAN
Illinois has an unconstitutional and unenforceable criminal ban on abortion.

COUNSELING BAN/GAG RULE
Illinois prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Illinois restricts insurance coverage of abortion for some individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
Illinois allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Illinois law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Illinois subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws
EMERGENCY CONTRACEPTION
Illinois law improves women’s access to emergency contraception (EC).

GUARANTEED ACCESS TO PRESCRIPTIONS
Illinois has a law that requires pharmacies to dispense women’s birth control.

INSURANCE COVERAGE FOR CONTRACEPTION
Illinois law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Illinois provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Illinois provides certain low-income women increased coverage for Medicaid-funded family-planning services.

STATE CONSTITUTIONAL PROTECTION
Illinois’ constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

Other Related Laws
POST-VIABILITY ABORTION RESTRICTION
Illinois restricts post-viability abortion.

GRADE
B

ACCESS FACT
92 percent of Illinois counties have no abortion clinic

SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE
ILLINOIS CHOICE ACTION TEAM
Benita Ulisano
Co-Chair
Dennis Murphy
Co-Chair
559 W. Diversey Parkway
Unit 119
Chicago, IL 60614
www.ilchoiceactionteam.org
@ICATIllinois
INDIANA

Political Information

EXECUTIVE
Governor Mike Pence (R) is anti-choice.

LEGISLATURE
The Indiana Senate is anti-choice.
The Indiana House is anti-choice.

Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Indiana’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Indiana has criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
Indiana law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Indiana prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Indiana restricts insurance coverage of abortion for some individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
Indiana allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Indiana restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Indiana law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Indiana subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Indiana provides certain low-income women increased coverage for Medicaid-funded family-planning services.

STATE CONSTITUTIONAL PROTECTION
Indiana’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Indiana restricts post-viability abortion.
IOWA

Political Information

EXECUTIVE
Governor Terry Branstad (R) is anti-choice.

LEGISLATURE
The Iowa Senate is pro-choice.
The Iowa House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Iowa’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Iowa has an unconstitutional and unenforceable criminal ban on abortion.

REFUSAL TO PROVIDE MEDICAL SERVICES
Iowa allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Iowa restricts low-income women’s access to abortion.

Pro-Choice Laws

INSURANCE COVERAGE FOR CONTRACEPTION
Iowa law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Iowa provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Iowa restricts post-viability abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Iowa law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Iowa prohibits certain qualified health-care professionals from providing abortion care.

85 percent of Iowa counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE

Access Fact
85 percent of Iowa counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE

GRADE
C+

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
KANSAS

Political Information

EXECUTIVE
Governor Sam Brownback (R) is anti-choice.

LEGISLATURE
The Kansas Senate is anti-choice.
The Kansas House is anti-choice.

Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Kansas’ Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Kansas has criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
Kansas law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Kansas prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

CRISIS PREGNANCY CENTERS
Kansas funds CPCs directly and refers women to CPCs.

INSURANCE PROHIBITION FOR ABORTION
Kansas restricts insurance coverage of abortion for all individuals.

PUBLIC FACILITIES AND EMPLOYEES RESTRICTION
Kansas prohibits the use of all public funds and public employees for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Kansas allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Kansas restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Kansas law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Kansas has an unenforceable regulatory scheme which imposes a variety of burdensome requirements on abortion providers that are not imposed on other health-care providers.

Pro-Choice Laws

PROTECTION AGAINST CLINIC VIOLENCE
Kansas law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Kansas restricts post-viability abortion.
KENTUCKY

Political Information
EXECUTIVE
Governor Steve Beshear (D) is mixed-choice.

LEGISLATURE
The Kentucky Senate is anti-choice.
The Kentucky House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Kentucky’s Who Decides? web page.

Anti-Choice Laws
ABORTION BAN
Kentucky has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Kentucky has a partially unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Kentucky prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Kentucky restricts insurance coverage of abortion for all individuals.

PUBLIC FACILITIES RESTRICTION
Kentucky prohibits the use of all public facilities for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Kentucky allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

REstrictions on low-income women’s access to abortion
Kentucky restricts low-income women’s access to abortion.

restrictions on young women’s access to abortion
Kentucky law restricts young women’s access to abortion services by mandating parental consent.

Targeted regulation of abortion providers (trap)
Kentucky subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Other Related Laws
Post-viability abortion restriction
Kentucky restricts post-viability abortion.

access fact
98 percent of Kentucky counties have no abortion clinic
source: Guttmacher institute
Political Information

EXECUTIVE
Governor Bobby Jindal (R) is anti-choice.

LEGISLATURE
The Louisiana Senate is anti-choice. The Louisiana House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Louisiana's Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Louisiana has criminal bans on abortion and has a near-total criminal ban on abortion that would take effect if Roe v. Wade were overturned.

BIASED COUNSELING & MANDATORY DELAY
Louisiana law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Louisiana prohibits certain state employees and organizations receiving state funds from referring for abortion services.

CRISIS PREGNANCY CENTERS
Louisiana funds CPCs directly, refers women to CPCs, and has a “Choose Life” license-plate program.

INSURANCE PROHIBITION FOR ABORTION
Louisiana restricts insurance coverage of abortion for some individuals.

PUBLIC FACILITIES RESTRICTION
Louisiana prohibits the use of public facilities for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Louisiana allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Louisiana restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Louisiana law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Louisiana subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Louisiana provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Louisiana restricts post-viability abortion.
Political Information

**EXECUTIVE**
Governor Paul LePage (R) is anti-choice.

**LEGISLATURE**
The Maine Senate is mixed-choice.
The Maine House is pro-choice.

Laws in Brief

*This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Maine’s Who Decides? web page.*

Anti-Choice Laws

**REFUSAL TO PROVIDE MEDICAL SERVICES**
Maine allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

**RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION**
Maine restricts low-income women’s access to abortion.

**RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION**
Maine restricts young women’s access to abortion by requiring parental consent in some cases and mandating counseling before a young woman may obtain abortion care.

**TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)**
Maine prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

**EMERGENCY CONTRACEPTION**
Maine law improves women’s access to emergency contraception (EC).

**FREEDOM OF CHOICE ACT**
Maine has an affirmative right to choose in its state law.

**GUARANTEED ACCESS TO PRESCRIPTIONS**
Maine guarantees that women’s birth-control prescriptions will be filled.

**INSURANCE COVERAGE FOR CONTRACEPTION**
Maine law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

**PROTECTION AGAINST CLINIC VIOLENCE**
Maine law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

**INFORMED CONSENT**
Maine has an abortion-specific informed-consent law.

**POST-VIABILITY ABORTION RESTRICTION**
Maine restricts post-viability abortion.

---

**ACCESS FACT**

81 percent of Maine counties have no abortion clinic.

*SOURCE: GUTTMACHER INSTITUTE*
Political Information

EXECUTIVE
Governor Larry Hogan (R) is mixed-choice.

LEGISLATURE
The Maryland Senate is pro-choice.
The Maryland House is pro-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Maryland’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Maryland allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Maryland law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Maryland prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Maryland law improves women’s access to emergency contraception (EC).

FREEDOM OF CHOICE ACT
Maryland has an affirmative right to choose in its state law.

INSURANCE COVERAGE FOR CONTRACEPTION
Maryland law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Maryland provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Maryland provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Maryland law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Maryland restricts post-viability abortion.
**Political Information**

**EXECUTIVE**
Governor Charles Baker (R) is mixed-choice.

**LEGISLATURE**
The Massachusetts Senate is pro-choice. The Massachusetts House is pro-choice.

**Laws in Brief**
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Massachusetts’ Who Decides? web page.

**Anti-Choice Laws**

**ABORTION BAN**
Massachusetts has an unconstitutional and unenforceable criminal ban on abortion.

**BIASED COUNSELING & MANDATORY DELAY**
Massachusetts has a partially unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

**INSURANCE PROHIBITION FOR ABORTION**
Massachusetts restricts insurance coverage of abortion for some individuals.

**REFUSAL TO PROVIDE MEDICAL SERVICES**
Massachusetts allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

**RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION**
Massachusetts law restricts young women’s access to abortion services by mandating parental consent.

**TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)**
Massachusetts prohibits certain qualified health-care professionals from providing abortion care and has an unconstitutional and unenforceable law that subjects abortion providers to burdensome restrictions not applied to other medical professionals.

**Pro-Choice Laws**

**EMERGENCY CONTRACEPTION**
Massachusetts law improves women’s access to emergency contraception (EC).

**INSURANCE COVERAGE FOR CONTRACEPTION**
Massachusetts law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

**LOW-INCOME WOMEN’S ACCESS TO ABORTION**
Massachusetts provides low-income women access to abortion.

**PROTECTION AGAINST CLINIC VIOLENCE**
Massachusetts law protects women seeking reproductive-health care and medical personnel from blockades and violence.

**STATE CONSTITUTIONAL PROTECTION**
Massachusetts’ constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

**Other Related Laws**

**POST-VIABILITY ABORTION RESTRICTION**
Massachusetts restricts post-viability abortion.

---

**ACCESS FACT**

**36 percent** of Massachusetts counties have no abortion clinic

**SOURCE:** GUTTMACHER INSTITUTE

**STATE AFFILIATE**

**NARAL PRO-CHOICE MASSACHUSETTS**
Megan Amundson
Executive Director
15 Court Square
Suite 900
Boston, MA 02108
P: 617.556.8800
www.prochoicemass.org
@ProChoiceMass

---

**GRADE**
B-

**ACCESS FACT**

**ACCESS FACT**

**36 percent** of Massachusetts counties have no abortion clinic

**SOURCE:** GUTTMACHER INSTITUTE

**STATE AFFILIATE**

**NARAL PRO-CHOICE MASSACHUSETTS**
Megan Amundson
Executive Director
15 Court Square
Suite 900
Boston, MA 02108
P: 617.556.8800
www.prochoicemass.org
@ProChoiceMass

---

**ProChoiceAmerica.org | ProChoiceAmericaFDN.org**
**Political Information**

**EXECUTIVE**
Governor Rick Snyder (R) is anti-choice.

**LEGISLATURE**
The Michigan Senate is anti-choice.
The Michigan House is anti-choice.

**Laws in Brief**
*This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Michigan’s Who Decides? web page.*

**Anti-Choice Laws**

**ABORTION BANS**
Michigan bans a safe abortion procedure and has unconstitutional and unenforceable criminal bans on abortion.

**BIASED COUNSELING & MANDATORY DELAY**
Michigan has a partially unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

**COUNSELING BAN/GAG RULE**
Michigan prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

**CRISIS PREGNANCY CENTERS**
Michigan funds CPCs directly.

**INSURANCE PROHIBITION FOR ABORTION**
Michigan restricts insurance coverage of abortion for all individuals.

**Pro-Choice Laws**

**INSURANCE COVERAGE FOR CONTRACEPTION**
Michigan law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

**LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING**
Michigan provides certain low-income women increased coverage for Medicaid-funded family-planning services.

**PROTECTION AGAINST CLINIC VIOLENCE**
Michigan law protects women seeking reproductive-health care and medical personnel from blockades and violence.

**Other Related Laws**

**POST-VIABILITY ABORTION RESTRICTION**
Michigan restricts post-viability abortion.
MINNESOTA

Political Information
EXECUTIVE
Governor Mark Dayton (D) is pro-choice.

LEGISLATURE
The Minnesota Senate is pro-choice. The Minnesota House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Minnesota’s Who Decides? web page.

Anti-Choice Laws
BIASED COUNSELING & MANDATORY DELAY
Minnesota law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Minnesota prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

CRISIS PREGNANCY CENTERS
Minnesota funds CPCs directly and refers women to CPCs.

REFUSAL TO PROVIDE MEDICAL SERVICES
Minnesota allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Minnesota law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Minnesota subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws
EMERGENCY CONTRACEPTION
Minnesota law improves women’s access to emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Minnesota provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Minnesota provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Minnesota law protects women seeking reproductive-health care and medical personnel from blockades and violence.

STATE CONSTITUTIONAL PROTECTION
Minnesota’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

Other Related Laws
POST-VIABILITY ABORTION RESTRICTION
Minnesota has an unconstitutional and unenforceable law restricting post-viability abortion.

ACCESS FACT
95 percent of Minnesota counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE
NARAL PRO-CHOICE MINNESOTA
Andrea Ledger
Executive Director
2300 Myrtle Avenue
Suite 120
Saint Paul, MN 55114
P: 651.602.7655
www.prochoicemnnesota.org
@ProChoiceMN

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
Mississippi

Political Information

EXECUTIVE
Governor Phil Bryant (R) is anti-choice.

LEGISLATURE
The Mississippi Senate is anti-choice. The Mississippi House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Mississippi’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Mississippi has criminal bans on abortion and has a near-total criminal ban on abortion that would take effect if Roe v. Wade were overturned.

BIASED COUNSELING & MANDATORY DELAY
Mississippi law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Mississippi prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

CRISIS PREGNANCY CENTERS
Mississippi refers women to CPCs and has a “Choose Life” license-plate program.

INSURANCE PROHIBITION FOR ABORTION
Mississippi restricts insurance coverage of abortion for some individuals.

PUBLIC FACILITIES RESTRICTION
Mississippi prohibits the use of public facilities for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Mississippi allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Mississippi restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Mississippi law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Mississippi subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Mississippi provides certain low-income women increased coverage for Medicaid-funded family-planning services.

GRADE F
ACCESS FACT 99 percent of Mississippi counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE
MISSOURI

Political Information

EXECUTIVE
Governor Jay Nixon (D) is mixed-choice.

LEGISLATURE
The Missouri Senate is anti-choice.
The Missouri House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Missouri’s Who Decides? webpage.

Anti-Choice Laws

ABORTION BAN
Missouri bans a safe abortion procedure.

BIASED COUNSELING & MANDATORY DELAY
Missouri law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Missouri prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

CRISIS PREGNANCY CENTERS
Missouri funds CPCs directly.

INSURANCE PROHIBITION FOR ABORTION
Missouri restricts insurance coverage of abortion for all individuals.

PUBLIC FACILITIES AND EMPLOYEES RESTRICTIONS
Missouri prohibits the use of all public facilities and public employees for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Missouri allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Missouri restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Missouri law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Missouri subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Missouri provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Missouri restricts post-viability abortion.
Political Information

EXECUTIVE
Governor Steve Bullock (D) is pro-choice.

LEGISLATURE
The Montana Senate is mixed-choice. The Montana House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Montana’s Who Decides? web page.

Anti-Choice Laws

BIASED COUNSELING & MANDATORY DELAY
Montana has an unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

REFUSAL TO PROVIDE MEDICAL SERVICES
Montana allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Montana has an unconstitutional and unenforceable law that restricts young women’s access to abortion services by mandating parental consent.

Pro-Choice Laws

INSURANCE COVERAGE FOR CONTRACEPTION
Montana law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Montana provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Montana provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Montana law protects women seeking reproductive-health care and medical personnel from blockades and violence.

STATE CONSTITUTIONAL PROTECTION
Montana’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Montana restricts post-viability abortion.
NEBRASKA

Political Information

EXECUTIVE
Governor Pete Ricketts (R) is anti-choice.

LEGISLATURE
The Nebraska Legislature is anti-choice.

Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Nebraska’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Nebraska has criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
Nebraska law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Nebraska prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

CRISIS PREGNANCY CENTERS
Nebraska refers women to CPCs.

INSURANCE PROHIBITION FOR ABORTION
Nebraska restricts insurance coverage of abortion for all individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
Nebraska allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Nebraska restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Nebraska law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Nebraska prohibits certain qualified health-care professionals from providing abortion care.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Nebraska restricts post-viability abortion.

GRADE F

ACCESS FACT

97 percent of Nebraska counties have no abortion clinic

SOURCE: GUTTMACHER INSTITUTE
Political Information

EXECUTIVE
Governor Brian Sandoval (R) is mixed-choice.

LEGISLATURE
The Nevada Senate is mixed-choice.
The Nevada Assembly is mixed-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Nevada’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Nevada allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Nevada restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Nevada has an unconstitutional and unenforceable law that restricts young women’s access to abortion services by mandating parental notice.

Pro-Choice Laws

FREEDOM OF CHOICE ACT
Nevada has an affirmative right to choose in its state law.

GUARANTEED ACCESS TO PRESCRIPTIONS
Nevada guarantees that women’s birth-control prescriptions will be filled.

INSURANCE COVERAGE FOR CONTRACEPTION
Nevada law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

PROTECTION AGAINST CLINIC VIOLENCE
Nevada law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

INFORMED CONSENT
Nevada has an abortion-specific informed-consent law.

POST-VIABILITY ABORTION RESTRICTION
Nevada restricts post-viability abortion.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Nevada law subjects abortion providers to burdensome restrictions not applied to other medical professionals.

ACCESS FACT
88 percent of Nevada counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE
NEW HAMPSHIRE

Political Information

EXECUTIVE
Governor Maggie Hassan (D) is pro-choice.

LEGISLATURE
The New Hampshire Senate is mixed-choice.
The New Hampshire House is mixed-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit New Hampshire’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
New Hampshire bans a safe abortion procedure.

Restrictions on low-income women’s access to abortion
New Hampshire restricts low-income women’s access to abortion.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
New Hampshire law improves women’s access to emergency contraception (EC).

INSURANCE COVERAGE FOR CONTRACEPTION
New Hampshire law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
New Hampshire provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
New Hampshire has an unenforceable law to protect women seeking reproductive-health care and medical personnel from harassment, blockades, and violence.

ACCESS FACT

50 percent of New Hampshire counties have no abortion clinic

SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE

NARAL PRO-CHOICE NEW HAMPSHIRE
Laura Thibault
Executive Director
18 Low Avenue
Concord, NH 03301
P: 603.228.1224
www.prochoicenewhampshire.org @NARALNH
NEW JERSEY

Political Information

EXECUTIVE
Governor Chris Christie (R) is anti-choice.

LEGISLATURE
The New Jersey Senate is pro-choice.
The New Jersey Assembly is pro-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit New Jersey’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
New Jersey has an unconstitutional and unenforceable criminal ban on abortion.

REFUSAL TO PROVIDE MEDICAL SERVICES
New Jersey allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
New Jersey has an unconstitutional and unenforceable law that restricts young women’s access to abortion services by mandating parental notice.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
New Jersey law improves women’s access to emergency contraception (EC).

GUARANTEED ACCESS TO PRESCRIPTIONS
New Jersey law guarantees that women’s birth-control prescriptions will be filled.

INSURANCE COVERAGE FOR CONTRACEPTION
New Jersey law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
New Jersey provides low-income women access to abortion.

STATE CONSTITUTIONAL PROTECTION
New Jersey’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
New Jersey law subjects abortion providers to burdensome restrictions not applied to other medical professionals.

ACCESS FACT
48 percent of New Jersey counties have no abortion clinic.

SOURCE: GUTTMACHER INSTITUTE

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
NEW MEXICO

Political Information

EXECUTIVE
Governor Susana Martinez (R) is anti-choice.

LEGISLATURE
The New Mexico Senate is pro-choice.
The New Mexico House is mixed-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit New Mexico’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
New Mexico has an unconstitutional and unenforceable criminal ban on abortion.

REFUSAL TO PROVIDE MEDICAL SERVICES
New Mexico allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
New Mexico has an unconstitutional and unenforceable law that restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
New Mexico prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
New Mexico law improves women’s access to emergency contraception (EC).

INSURANCE COVERAGE FOR CONTRACEPTION
New Mexico law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
New Mexico provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
New Mexico provides certain low-income women increased coverage for Medicaid-funded family-planning services.

STATE CONSTITUTIONAL PROTECTION
New Mexico’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
New Mexico restricts post-viability abortion.

94 percent of New Mexico counties have no abortion clinic

SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE

NARAL PRO-CHOICE NEW MEXICO
Ann Piper
Foundation Board Chair
P.O. Box 97
Albuquerque, NM 87103
P: 505.259.0659
**Executive**

Governor Andrew Cuomo (D) is pro-choice.

**Legislature**

The New York Senate is anti-choice. The New York Assembly is pro-choice.

**Laws in Brief**

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit New York’s Who Decides? web page.

**Anti-Choice Laws**

**Refusal to Provide Medical Services**

New York allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

**Targeted Regulation of Abortion Providers (TRAP)**

New York prohibits certain qualified health-care professionals from providing abortion care and has an unconstitutional and unenforceable law that subjects abortion providers to burdensome restrictions not applied to other medical professionals.

**Pro-Choice Laws**

**Emergency Contraception**

New York law improves women’s access to emergency contraception (EC).

**Insurance Coverage for Contraception**

New York law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

**Low-Income Women’s Access to Abortion**

New York provides low-income women access to abortion.

**Low-Income Women’s Access to Family Planning**

New York provides certain low-income women increased coverage for Medicaid-funded family-planning services.

**Protection Against Clinic Violence**

New York law protects women seeking reproductive-health care and medical personnel from blockades and violence.

**Other Related Laws**

**Post-Viability Abortion Restriction**

New York restricts post-viability abortion.

---

**ACCESS FACT**

53 percent of New York counties have no abortion clinic

**SOURCE:** GUTTMACHER INSTITUTE

**State Affiliate**

**NARAL Pro-Choice America New York**

Andrea Miller
President
470 Park Avenue S.
7th Floor S.
New York, NY 10016
P: 212.343.0114
www.prochoiceny.org
@ProChoiceNY

---

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
NORTH CAROLINA

Political Information

EXECUTIVE
Governor Patrick McCrory (R) is anti-choice.

LEGISLATURE
The North Carolina Senate is anti-choice.
The North Carolina House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit North Carolina’s Who Decides? web page.

Anti-Choice Laws

BIASED COUNSELING & MANDATORY DELAY
North Carolina law subjects women seeking abortion services to biased counseling requirements and mandatory delays.

CRISIS PREGNANCY CENTERS
North Carolina funds CPCs directly, refers women to CPCs, and has an unconstitutional and unenforceable “Choose Life” license-plate program.

INSURANCE PROHIBITION FOR ABORTION
North Carolina restricts insurance coverage of abortion for some individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
North Carolina allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
North Carolina restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
North Carolina law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
North Carolina subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

INSURANCE COVERAGE FOR CONTRACEPTION
North Carolina law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
North Carolina provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
North Carolina law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
North Carolina restricts post-viability abortion.
Political Information

EXECUTIVE
Governor Jack Dalrymple (R) is anti-choice.

LEGISLATURE
The North Dakota Senate is anti-choice.
The North Dakota House is anti-choice.

Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit North Dakota’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
North Dakota has criminal bans on abortion and has a near-total criminal ban on abortion that would take effect if Roe v. Wade were overturned.

BIASED COUNSELING & MANDATORY DELAY
North Dakota law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
North Dakota has a partially unconstitutional and unenforceable law that prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

CRISIS PREGNANCY CENTERS
North Dakota funds CPCs directly and refers women to CPCs.

INSURANCE PROHIBITION FOR ABORTION
North Dakota restricts insurance coverage of abortion for all individuals.

PUBLIC FACILITIES RESTRICTION
North Dakota prohibits the use of some public facilities for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
North Dakota allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
North Dakota restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
North Dakota law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
North Dakota subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
North Dakota restricts post-viability abortion.

GRADE
F

ACCESS FACT
98 percent of North Dakota counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE
OHIO

Political Information

EXECUTIVE
Governor John Kasich (R) is anti-choice.

LEGISLATURE
The Ohio Senate is anti-choice.
The Ohio House is anti-choice.

Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Ohio’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Ohio bans a safe abortion procedure.

BIASED COUNSELING & MANDATORY DELAY
Ohio law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Ohio prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

CRISIS PREGNANCY CENTERS
Ohio funds CPCs directly, refers women to CPCs, and has a “Choose Life” license-plate program.

INSURANCE PROHIBITION FOR ABORTION
Ohio restricts insurance coverage of abortion for some individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
Ohio allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Ohio restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Ohio law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Ohio subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Ohio provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Ohio restricts post-viability abortion.

GRADE

F

ACCESS FACT

91 percent of Ohio counties have no abortion clinic*

SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE

NARAL PRO-CHOICE OHIO
Kellie Copeland
Executive Director
12000 Shaker Boulevard
Cleveland, OH 44120
P: 216.283.2180
www.prochoiceohio.org
@ProChoiceOH

* Note: Because the most recent published nationwide data are from 2011, and anti-choice restrictions in Ohio have gone into effect since, the current percentage of counties with no abortion clinic may be greater. As of the date of this publication, several media outlets have reported that only eight abortion clinics remain open in the state.
Political Information

EXECUTIVE
Governor Mary Fallin (R) is anti-choice.

LEGISLATURE
The Oklahoma Senate is anti-choice.
The Oklahoma House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Oklahoma’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Oklahoma has criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
Oklahoma law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Oklahoma prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

CRISIS PREGNANCY CENTERS
Oklahoma refers women to CPCs and has a “Choose Life” license-plate program.

INSURANCE PROHIBITION FOR ABORTION
Oklahoma restricts insurance coverage of abortion for all individuals.

PUBLIC FACILITIES AND EMPLOYEES RESTRICTION
Oklahoma prohibits the use of all public facilities and public employees for abortion services.

Pro-Choice Laws

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Oklahoma provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Oklahoma restricts post-viability abortion.

Access Fact
96 percent of Oklahoma counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE

Grade
F

OKLAHOMA
OREGON

Political Information

EXECUTIVE
Governor John Kitzhaber (D) is pro-choice.

LEGISLATURE
The Oregon Senate is pro-choice.
The Oregon House is pro-choice.

Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Oregon’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Oregon allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Oregon law improves women’s access to emergency contraception (EC).

INSURANCE COVERAGE FOR CONTRACEPTION
Oregon law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Oregon provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Oregon provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Oregon law protects women seeking reproductive-health care and medical personnel from blockades and violence.

STATE CONSTITUTIONAL PROTECTION
Oregon’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

78 percent of Oregon counties have no abortion clinic

SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE

NARAL PRO-CHOICE OREGON
Michele Stranger Hunter
Executive Director
P.O. Box 40472
Portland, OR 97240
P: 503.223.4510
www.prochoiceoregon.org
@ProChoiceOregon

GRADE A

ACCESS FACT

78 percent of Oregon counties have no abortion clinic

SOURCE: GUTTMACHER INSTITUTE

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
Political Information

EXECUTIVE
Governor Tom Wolf (D) is pro-choice.

LEGISLATURE
The Pennsylvania Senate is mixed-choice.
The Pennsylvania House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Pennsylvania’s Who Decides? web page.

Anti-Choice Laws

BIASED COUNSELING & MANDATORY DELAY
Pennsylvania law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Pennsylvania prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

CRISIS PREGNANCY CENTERS
Pennsylvania funds CPCs directly and refers women to CPCs.

INSURANCE PROHIBITION FOR ABORTION
Pennsylvania restricts insurance coverage of abortion for some individuals.

PUBLIC FACILITIES RESTRICTION
Pennsylvania prohibits the use of some public facilities for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Pennsylvania allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Pennsylvania restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Pennsylvania law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Pennsylvania subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Pennsylvania law improves women’s access to emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Pennsylvania provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Pennsylvania restricts post-viability abortion.

87 percent of Pennsylvania counties have no abortion clinic.
SOURCE: GUTTMACHER INSTITUTE
RHODE ISLAND

Political Information

EXECUTIVE
Governor Gina Raimondo (D) is pro-choice.

LEGISLATURE
The Rhode Island Senate is anti-choice.
The Rhode Island House is mixed-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Rhode Island’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Rhode Island has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING
Rhode Island law subjects women seeking abortion services to biased-counseling requirements.

INSURANCE PROHIBITION FOR ABORTION
Rhode Island restricts insurance coverage of abortion for some individuals and has an unconstitutional and unenforceable law that restricts insurance coverage of abortion for all individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
Rhode Island allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Rhode Island restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Rhode Island law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Rhode Island subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

INSURANCE COVERAGE FOR CONTRACEPTION
Rhode Island law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Rhode Island provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Rhode Island restricts post-viability abortion.

GRADE
D+

ACCESS FACT
80 percent of Rhode Island counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE
Political Information

EXECUTIVE
Governor Nikki Haley (R) is anti-choice.

LEGISLATURE
The South Carolina Senate is mixed-choice. The South Carolina House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit South Carolina's Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
South Carolina has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
South Carolina law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
South Carolina prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

CRISIS PREGNANCY CENTERS
South Carolina refers women to CPCs and has a “Choose Life” license-plate program.

INSURANCE PROHIBITION FOR ABORTION
South Carolina restricts insurance coverage of abortion for some individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
South Carolina allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
South Carolina restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
South Carolina law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
South Carolina subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
South Carolina law improves women’s access to emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
South Carolina provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
South Carolina restricts post-viability abortion.

South Carolina Grade

F

ACCESS FACT

93 percent of South Carolina counties have no abortion clinic

SOURCE: GUTTMACHER INSTITUTE
SOUTH DAKOTA

Political Information
EXECUTIVE
Governor Dennis Daugaard (R) is anti-choice.

LEGISLATURE
The South Dakota Senate is anti-choice. The South Dakota House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit South Dakota’s Who Decides? web page.

Anti-Choice Laws
ABORTION BANS
South Dakota has an unconstitutional and unenforceable criminal ban on abortion and has a near-total criminal ban on abortion that would take effect if Roe v. Wade were overturned.

BIASED COUNSELING & MANDATORY DELAY
South Dakota has a partially unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

CRISIS PREGNANCY CENTERS
South Dakota has an unconstitutional and unenforceable law forcing women to go to a CPC and refers women to CPCs.

INSURANCE PROHIBITION FOR ABORTION
South Dakota restricts insurance coverage of abortion for some individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
South Dakota allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
South Dakota restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
South Dakota law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
South Dakota subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Other Related Laws
POST-VIABILITY ABORTION RESTRICTION
South Dakota restricts post-viability abortion.

98 percent of South Dakota counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE
NARAL PRO-CHOICE SOUTH DAKOTA
Abbie Peterson
Executive Director
401 E. 8th Street
Suite 330G
Sioux Falls, SD 57103
P: 605.334.5065
www.prochoicesd.org
@NARALSD
Political Information

EXECUTIVE
Governor Bill Haslam (R) is anti-choice.

LEGISLATURE
The Tennessee Senate is anti-choice.
The Tennessee House is anti-choice.

Laws in Brief

This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Tennessee’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Tennessee has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Tennessee has an unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

CRISIS PREGNANCY CENTERS
Tennessee has a “Choose Life” license-plate program.

INSURANCE PROHIBITION FOR ABORTION
Tennessee restricts insurance coverage of abortion for some individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
Tennessee allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Tennessee restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Tennessee law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Tennessee prohibits certain qualified health-care professionals from providing abortion care and has an unconstitutional and unenforceable law that subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Tennessee restricts post-viability abortion.

GRADE

F

ACCESS FACT

96 percent of Tennessee counties have no abortion clinic

SOURCE: GUTTMACHER INSTITUTE
**TEXAS**

**Political Information**

**EXECUTIVE**
Governor Greg Abbott (R) is anti-choice.

**LEGISLATURE**
The Texas Senate is anti-choice.  
The Texas House is anti-choice.

**Laws in Brief**
*This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Texas’ Who Decides? web page.*

**Anti-Choice Laws**

**ABORTION BAN**
Texas has a criminal ban on abortion.

**BIASED COUNSELING & MANDATORY DELAY**
Texas law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

**COUNSELING BAN/GAG RULE**
Texas prohibits certain state employees and organizations receiving state funds from counseling or referring for abortion services.

**CRISIS PREGNANCY CENTERS**
Texas funds CPCs directly, refers women to CPCs, and has a “Choose Life” license-plate program.

**REFUSAL TO PROVIDE MEDICAL SERVICES**
Texas allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

**RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION**
Texas restricts low-income women’s access to abortion.

**RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION**
Texas law restricts young women’s access to abortion services by mandating parental notice and consent.

**TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)**
Texas subjects abortion providers to burdensome restrictions not applied to other medical professionals.

**Pro-Choice Laws**

**EMERGENCY CONTRACEPTION**
Texas law improves women’s access to emergency contraception (EC).

**LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING**
Texas provides certain low-income women increased coverage for family-planning services.

**Other Related Laws**

**POST-VIABILITY ABORTION RESTRICTION**
Texas restricts post-viability abortion.

---

**Access Fact**

93 percent of Texas counties have no abortion clinic*

*Source: Guttmacher Institute

**State Affiliate**

**NARAL PRO-CHOICE TEXAS**
Heather Busby  
Executive Director  
P.O. Box 684602  
Austin, TX 78768  
P: 512.462.1661

www.prochoicetexas.org

@NARALTX

*Note: Because the most recent published nationwide data are from 2011, and anti-choice restrictions in Texas have gone into effect since, the current percentage of counties with no abortion clinic may be greater. As of the date of this publication, the Texas Policy Evaluation Project has cited that only 20 abortion clinics remain open in the state.
Political Information

EXECUTIVE
Governor Gary Herbert (R) is anti-choice.

LEGISLATURE
The Utah Senate is anti-choice.
The Utah House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Utah’s Who Decides? web page.

Anti-Choice Laws
ABORTION BAN
Utah bans a safe abortion procedure.

BIASED COUNSELING & MANDATORY DELAY
Utah law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

INSURANCE PROHIBITION FOR ABORTION
Utah restricts insurance coverage of abortion for all individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
Utah allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Utah restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Utah law restricts young women’s access to abortion services by mandating parental notice and consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Utah subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws
EMERGENCY CONTRACEPTION
Utah law improves women’s access to emergency contraception (EC).

Other Related Laws
POST-VIABILITY ABORTION RESTRICTION
Utah restricts post-viability abortion.
VERMONT

Political Information
EXECUTIVE

LEGISLATURE
The Vermont Senate is pro-choice.
The Vermont House is pro-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Vermont’s Who Decides? web page.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Vermont law improves women’s access to emergency contraception (EC).

INSURANCE COVERAGE FOR CONTRACEPTION
Vermont law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Vermont provides low-income women access to abortion.

STATE CONSTITUTIONAL PROTECTION
Vermont’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

1 At the time this publication went to print, the final outcome of the race for governor was pending.

GRADE
A

ACCESS FACT
79 percent of Vermont counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE
**Political Information**

**EXECUTIVE**
Governor Terry McAuliffe (D) is pro-choice.

**LEGISLATURE**
The Virginia Senate is anti-choice. The Virginia House is anti-choice.

**Laws in Brief**
*This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Virginia’s Who Decides? web page.*

**Anti-Choice Laws**

**ABORTION BAN**
Virginia bans a safe abortion procedure.

**BIASED COUNSELING & MANDATORY DELAY**
Virginia law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

**COUNSELING BAN/GAG RULE**
Virginia prohibits certain state employees and organizations receiving state funds from referring women for abortion services.

**CRISIS PREGNANCY CENTERS**
Virginia refers women to CPCs.

**INSURANCE PROHIBITION FOR ABORTION**
Virginia restricts insurance coverage of abortion for some individuals.

**Pro-Choice Laws**

**LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING**
Virginia provides certain low-income women increased coverage for Medicaid-funded family-planning services.

**Other Related Laws**

**POST-VIABILITY ABORTION RESTRICTION**
Virginia restricts post-viability abortion.
Political Information

EXECUTIVE
Governor Jay Inslee (D) is pro-choice.

LEGISLATURE
The Washington Senate is mixed-choice.
The Washington House is pro-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Washington’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Washington allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Washington prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Washington law improves women’s access to emergency contraception (EC).

GUARANTEED ACCESS TO PRESCRIPTIONS
Washington law requires pharmacies to dispense women’s birth control.

INSURANCE COVERAGE FOR CONTRACEPTION
Washington law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Washington provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Washington provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Washington law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Washington restricts post-viability abortion.
WEST VIRGINIA

Political Information

EXECUTIVE
Governor Earl Ray Tomblin (D) is mixed-choice.

LEGISLATURE
The West Virginia Senate is anti-choice.
The West Virginia House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit West Virginia’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
West Virginia has unconstitutional and unenforceable criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
West Virginia law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

CRISIS PREGNANCY CENTERS
West Virginia refers women to CPCs.

Pro-Choice Laws

INSURANCE COVERAGE FOR CONTRACEPTION
West Virginia law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
West Virginia provides low-income women access to abortion.

STATE CONSTITUTIONAL PROTECTION
West Virginia’s constitution provides greater protection for a woman’s right to choose than the U.S. Constitution.

REFUSAL TO PROVIDE MEDICAL SERVICES
West Virginia allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

REstrictions on Young Women’s ACCESS to Abortion
West Virginia law restricts young women’s access to abortion services by mandating parental notice.
Political Information

EXECUTIVE
Governor Scott Walker (R) is anti-choice.

LEGISLATURE
The Wisconsin Senate is anti-choice.
The Wisconsin Assembly is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Wisconsin’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Wisconsin has unconstitutional and unenforceable criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
Wisconsin law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Wisconsin prohibits certain state employees and organizations receiving state funds from counseling or referring women for abortion services.

CRISIS PREGNANCY CENTERS
Wisconsin funds CPCs directly and refers women to CPCs.

INSURANCE PROHIBITION FOR ABORTION
Wisconsin restricts insurance coverage of abortion for some individuals.

REFUSAL TO PROVIDE MEDICAL SERVICES
Wisconsin allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Wisconsin restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Wisconsin law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Wisconsin subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Wisconsin law improves women’s access to emergency contraceptive (EC).

GUARANTEED ACCESS TO PRESCRIPTIONS
Wisconsin guarantees that women’s birth-control prescriptions will be filled.

INSURANCE COVERAGE FOR CONTRACEPTION
Wisconsin law requires health-insurance plans that cover prescription medication and employers that provide insurance coverage for prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Wisconsin provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Wisconsin law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Wisconsin restricts post-viability abortion.

GRADE
D+

96 percent of Wisconsin counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE
NARAL PRO-CHOICE WISCONSIN
Megan McDonell
Board Chair
612 W. Main Street
Suite 200
Madison, WI 53703
P: 608.287.0016
www.prochoicewisconsin.org
@NARALWI

ACCESS FACT
96 percent of Wisconsin counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
Wyoming

Political Information
EXECUTIVE
Governor Matt Mead (R) is anti-choice.

LEGISLATURE
The Wyoming Senate is mixed-choice. The Wyoming House is anti-choice.

Laws in Brief
This information is current as of November 5, 2014. For up-to-date information and detailed summaries, please visit Wyoming’s Who Decides? web page.

Anti-Choice Laws
REFUSAL TO PROVIDE MEDICAL SERVICES
Wyoming allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

Pro-Choice Laws
LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Wyoming provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws
POST-VIABILITY ABORTION RESTRICTION
Wyoming restricts post-viability abortion.

Restrictions on Low-Income Women’s Access to Abortion
Wyoming restricts low-income women’s access to abortion.

Restrictions on Young Women’s Access to Abortion
Wyoming law restricts young women’s access to abortion services by mandating parental notice and consent.

Targeted Regulation of Abortion Providers (TRAP)
Wyoming prohibits certain qualified health-care professionals from providing abortion care.

100 percent of Wyoming counties have no abortion clinic
SOURCE: GUTTMACHER INSTITUTE

GRADE
D+

ACCESS FACT

100 percent of Wyoming counties have no abortion clinic

STATE AFFILIATE
NARAL PRO-CHOICE WYOMING
Sharon Breitweiser
Executive Director
P.O. Box 271
Laramie, WY 82073
P: 307.742.9189
www.prochoicewyoming.org

ProChoiceAmerica.org | ProChoiceAmericaFDN.org
CONCLUSION
METHODOLOGY

GENERAL METHODOLOGY

NARAL Pro-Choice America and NARAL Pro-Choice America Foundation have supporting documentation for statements of fact made in Who Decides? The Status of Women’s Reproductive Rights in the United States. Copies of source documents are filed in NARAL Pro-Choice America and NARAL Pro-Choice America Foundation’s offices.

ACCESS FACTS: The number of abortion providers and analysis of census data was supplied by the Guttmacher Institute (Rachel Jones and Jenna Jerman, Abortion Incidence and Service Availability In the United States, 2011, Perspectives on Sexual and Reproductive Health, Mar. 2014, 46(1)).

STATE AND LOCAL LEGISLATIVE INFORMATION: This report uses “laws” to refer specifically to statutes adopted by the legislature or enacted by ballot measure. “Measures” is a broader term that includes the following: constitutional provisions, statutes, regulations, court decisions, ballot measures, opinions of state attorneys general, state policies, and other governmental actions with statewide effect. In addition to the types of measures that are highlighted on the “Fast Facts” pages of Who Decides?, the counts of anti-choice measures enacted provided on the “Key Findings” pages include but are not limited to measures that restrict state funds from going to any health center that provides abortion care; require a forced ultrasound as a condition of getting abortion care; and mandate “abstinence-only” programs. The pro-choice counts of measures enacted include but are not limited to measures that ameliorate anti-choice actions (e.g. require crisis pregnancy centers to disclose anti-choice bias); improve reproductive health; support healthy childbearing; and provide young people with comprehensive sex education. For further information, please contact the NARAL Policy Department.

REPORT CARD METHODOLOGY

Who Decides? reflects the legal state of women’s access to reproductive-health services in the previous calendar year. (Note: The Key Findings: Political Landscape data reflect the year ahead.)

For 17 years, Who Decides? has used a grading system to capture the cumulative burden each state imposes on access to reproductive-health care. Points are subtracted for anti-choice measures and added for pro-choice measures. Measures that impose the greatest burdens on women are weighted most heavily.

Likewise, demerits fall most heavily on measures that are in force, rather than measures that courts have declared invalid. For each issue area listed below, a state receives points in return if the measure is held unconstitutional or enjoined. A detailed analysis of the report-card methodology appears below. For the purposes of this publication’s methodology, the term “exceptions” may include but is not limited to exceptions for the life or health of the woman; rape and incest; emergency situations; cases of fetal anomaly; situations of child abuse; private employers; and state employees.

The nationwide grade reflects not only state restrictions on the right to choose, but also federal anti-choice measures.

State rankings and grades are based on a combination of factors, including enacted measures, level of legislative and regulatory activity, and a state’s overall legislative and political landscape as it pertains to advancing or restricting reproductive rights.

ABORTION BAN(S)
(- up to 80 points)

Points were subtracted for each abortion ban based either on the point in pregnancy when the ban(s) begin, or on whether the statute bans a specific procedure. Points were added for certain exceptions included in the ban(s). Additional points were subtracted for any ban(s) whose effective dates would be triggered if the Supreme Court overturns Roe v. Wade.
METHODOLOGY

BIASED COUNSELING & MANDATORY DELAYS
(- up to 25 points)
Points were allocated based on the length of the waiting period; whether multiple trips are required; whether a physician is required personally to provide specified information; whether the woman must receive state-prepared materials; and whether the woman must receive other material, oral or written, that contains biased information. No points were subtracted if a state has an abortion-specific informed-consent measure that does not require biased counseling or a mandatory delay.

COUNSELING BAN/GAG RULE
(- up to 10 points)
Points were subtracted if the ban applies to counseling and/or referrals and if the ban applies to all or some public funds or employees. Points were added based on the exceptions included in the measure.

CRISIS PREGNANCY CENTERS
(- up to 15 points)
Points were subtracted if a state funds CPCs directly with taxpayer dollars or tax benefits; requires a woman to go to a CPC or refers women to CPCs; and/or has a “Choose Life” license-plate program (enacted by the legislature or executive) if there is no corresponding pro-choice option. There are multiple potential sources of direct funding for CPCs; while most states use state dollars, some states channel federal funds to CPCs. Points were added if states disclosed the limited nature of CPC services in any of their measures.

EMERGENCY CONTRACEPTION
(+ up to 25 points)
Points were added if the state ensures that sexual-assault survivors receive counseling about and access to emergency contraception (EC) in emergency rooms; if the state’s Medicaid program covers over-the-counter EC; and if pharmacists are allowed to provide EC to a woman without a prescription through a measure specific to EC or one that permits collaborative-therapy agreements generally and includes EC. (These measures were in place before the Food and Drug Administration (FDA) approved Plan B One-Step® for over-the-counter sales for women of all ages.)

FREEDOM OF CHOICE ACT
(+ up to 55 points)
Points were added if a state has passed legislation to codify the protections of Roe v. Wade and provides an affirmative right to choose.

GUARANTEED ACCESS TO PRESCRIPTIONS
(+ up to 10 points)
Points were added if a state explicitly guarantees a woman’s right to have her birth-control prescription filled.

INSURANCE COVERAGE FOR ABORTION
(+ up to 35 points)
Points were added if a state guarantees insurance coverage of abortion: in the private insurance market, the state health-insurance exchange, and for all or some state and/or municipal employees.

INSURANCE COVERAGE FOR CONTRACEPTION
(+ up to 20 points)
Points were added if a state requires health-insurance plans to cover contraceptives to the same extent that they cover other prescription medication, and if a state limits strictly a health plan’s ability to impose cost-sharing on certain forms of contraceptive products. Fewer points were added if the measure has an overly broad refusal clause or requires an insurer only to offer and make available such coverage but not to include it in every plan.

INSURANCE PROHIBITION FOR ABORTION
(- up to 35 points)
Points were subtracted if the measure prohibits insurance coverage of abortion in the private insurance market; if the measure prohibits insurance coverage of abortion in the state health-insurance exchange; if the measure prohibits insurance coverage of abortion for all or some state and/or municipal employees; and if the measure requires insurers to provide a policy alternative excluding abortion. Points were added based on the exceptions included in the measure.
METHODOLOGY

LOW-INCOME WOMEN’S ACCESS TO ABORTION (AND RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION)  
(- up to 25 points)
Points were deducted based on the circumstances under which the state medical assistance program funds abortion services: only to preserve the woman’s life; only in cases of rape, incest, or life endangerment; or in cases of rape, incest, life endangerment, and limited health circumstances. If a state medical assistance program funds abortion care in all or most circumstances, no points were subtracted.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING  
(+ up to 5 points)
Points were added if the state provides increased coverage for Medicaid-covered reproductive-health-care services through a federal Medicaid waiver or through a family-planning state plan amendment (SPA). A state that applies for and receives a waiver or SPA is generally allowed to increase eligibility for Medicaid family-planning services and/or improve the quality of those services for a specific period of time. The duration, eligibility requirements, and covered services provided by each state’s expanded coverage program vary from state to state. While pursuant to the Affordable Care Act it is anticipated that Medicaid family-planning waivers may be phased out and replaced with SPAs, for the time being, NARAL Pro-Choice America and NARAL Pro-Choice America Foundation will continue to include Medicaid waivers as an indicator of states’ commitment to providing essential family-planning care to low-income women.

POST-VIABILITY ABORTION RESTRICTION  
(- up to 10 points)
If a post-viability abortion restriction has adequate life and health exceptions and does not define viability as occurring at a particular point in pregnancy, no points were subtracted. Points were subtracted for the lack or inadequacy of the health exception and if the state defines viability as occurring at a particular point in pregnancy.

PROTECTION AGAINST CLINIC VIOLENCE  
(+ up to 15 points)
Points were added if the measure prohibits interference with entry or exit to a facility; physical invasion of the facility including trespass, property damage, arson, and bombing; excessive noise, odors, or telephone calls; and threats, including weapon possession at demonstrations. Points were also added if the measure creates a buffer zone, and/or permits injunctive relief.

PUBLIC FACILITIES AND PUBLIC EMPLOYEES RESTRICTION(S)  
(- up to 10 points)
Points were subtracted if all or some public employees and/or facilities are prohibited from providing abortion services. Points were added based on the exceptions included in the measure.

REFUSAL TO PROVIDE MEDICAL SERVICES  
(- up to 20 points)
Points were subtracted for each area in which individuals or organizations may refuse to provide: abortion, contraception, or sterilization, and/or related counseling, referrals, insurance coverage, or prescriptions.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION  
(- up to 25 points)
Points were subtracted based on whether consent or notice is required before a minor may obtain abortion services, whose consent or notice is required, whether there is a physician bypass, whether the judicial-bypass procedure is adequate, and whether there is a waiting period. Points were added based on the exceptions included in the measure.

STATE CONSTITUTIONAL PROTECTION  
(+ up to 20 points)
Points were added if a state constitution protects the right to choose beyond the U.S. Constitution, and to the degree that the state constitutional protection prevents imposition of restrictions on the right to choose.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)  
(- up to 30 points)
Points were allocated based on the breadth and severity of all TRAP measures imposed. Additional points were subtracted if a state prohibits certain qualified health-care professionals from providing abortion care. (Because of the breadth of TRAP measures, the summaries include only select examples that illustrate the burdens these measures impose on abortion providers.)
ACKNOWLEDGMENTS

The Policy Department at NARAL Pro-Choice America and NARAL Pro-Choice America Foundation researched and wrote this study. The Policy Department staff for the 2015 edition of Who Decides? The Status of Women’s Reproductive Rights in the United States includes: Vice President for Policy Donna Crane; Deputy Policy Director/General Counsel Lissy Moskowitz; Deputy Policy Director Leslie McGorman; Senior Policy Representative Nick Wunder; Policy Representative Kate Ryan; Policy Aides Maggie Jo Buchanan and Emily Rohlf; Policy Assistant Jennifer Lucas; and interns Katie Cullum and Dana Benyas.

President Ilyse Hogue, along with the boards of directors of NARAL Pro-Choice America and NARAL Pro-Choice America Foundation, provided support and encouragement. Our state affiliates and coalition partners, including the American Civil Liberties Union and affiliates, Planned Parenthood Federation of America and affiliates, the Family Planning Council of Iowa, Family Planning Association of Maine, South Carolina for Healthy Families, and the Illinois Choice Action Team, provided valuable information. Countless others, particularly in state Medicaid offices and courts across the country, patiently answered requests for documents and information. We also appreciate the continued fine work of our graphic designers, Do Good Design, and our printer, Mount Vernon Printing.

The generous financial support of the Robert Sterling Clark Foundation made this report possible. NARAL Pro-Choice America and NARAL Pro-Choice America Foundation assume sole responsibility for the content of the 24th edition of Who Decides?.

DISCLAIMER

Who Decides? The Status of Women’s Reproductive Rights in the United States is strictly for informational purposes and does not constitute legal services or representation. For legal advice, a practicing attorney who has a thorough knowledge of current law in the state or locality and who is informed about all relevant details of the situation should be consulted.

NARAL Pro-Choice America and NARAL Pro-Choice America Foundation do not guarantee the accuracy of the contents of this book. Laws change, often rapidly, and interpretations of statutes may vary. Legislation may have been acted upon, or cases decided, after the date this book went to press. Unless otherwise noted, bill- and case-tracking concluded on November 5, 2014.

NARAL Pro-Choice America and NARAL Pro-Choice America Foundation hereby specifically disclaim any liability for loss incurred as a consequence of the use of any material in this book.
NARAL PRO-CHOICE AMERICA STATE AFFILIATES

NARAL PRO-CHOICE ARIZONA
Kat Sabine
Executive Director
P.O. Box 16675
Phoenix, AZ 85011
www.prochoicearizona.org
@ProChoiceAZ

NARAL PRO-CHOICE CALIFORNIA
Amy Everitt
State Director
355 S. Van Ness Avenue
San Francisco, CA 94103
P: 415.890.1020
www.prochoicecalifornia.org
@ProChoiceCA

NARAL PRO-CHOICE COLORADO
Karen Middleton
Executive Director
1905 Sherman Street
Suite 800
Denver, CO 80203
P: 303.394.1973
www.prochoicecolorado.org
@NARALColorado

NARAL PRO-CHOICE CONNECTICUT
Christian Miron
Executive Director
56 Arbor Street
Suite 412
Hartford, CT 06106
P: 203.787.8763
www.prochoicect.org
@ProChoiceCT

NARAL PRO-CHOICE ILLINOIS ACTION TEAM
Benita Ulisano
Co-Chair
Dennis Murphy
Co-Chair
559 W. Diversey Parkway
Unit 119
Chicago, IL 60614
www.ilchoiceactionteam.org
@ICATIllinois

NARAL PRO-CHOICE MARYLAND
Jodi Finkelstein
Executive Director
8905 Fairview Road
Suite 401
Silver Spring, MD 20910
P: 301.565.4154
www.prochoicemaryland.org
@ProChoiceMD

NARAL PRO-CHOICE MASSACHUSETTS
Megan Amundson
Executive Director
15 Court Square
Suite 900
Boston, MA 02108
P: 617.556.8800
www.prochoicemass.org
@ProChoiceMass

NARAL PRO-CHOICE MINNESOTA
Andrea Ledger
Executive Director
2300 Myrtle Avenue
Suite 120
Saint Paul, MN 55114
P: 651.602.7655
www.prochoiceminnesota.org
@ProChoiceMN

NARAL PRO-CHOICE MISSOURI
Pamela Sumners
Executive Director
1210 S. Vandeventer Avenue
St. Louis, MO 63110
P: 314.531.8616
www.prochoicemissouri.org
@NARALMissouri

NARAL PRO-CHOICE MONTANA
Maggie Moran
Executive Director
P.O. Box 279
Helena, MT 59624
P: 406.443.0276
www.prochoicemontana.org
@ProChoiceMT

NARAL PRO-CHOICE NEW HAMPSHIRE
Laura Thibault
Executive Director
18 Low Avenue
Concord, NH 03301
P: 603.228.1224
www.prochoicenewhampshire.org
@NARALNH

NARAL PRO-CHOICE NEW MEXICO
Ann Piper
Foundation Board Chair
P.O. Box 97
Albuquerque, NM 87103
P: 505.259.0659

ProChoiceAmerica.org | ProChoiceAmericaFDN.org

88 NARAL Pro-Choice America and NARAL Pro-Choice America Foundation
# NARAL PRO-CHOICE AMERICA STATE AFFILIATES

## NARAL PRO-CHOICE NEW YORK
- **Andrea Miller**  
  President  
  470 Park Avenue S.  
  7th Floor S.  
  New York, NY 10016  
  P: 212.343.0114  
  [www.prochoiceny.org](http://www.prochoiceny.org)  
  [@ProChoiceNY](https://twitter.com/ProChoiceNY)

## NARAL PRO-CHOICE NORTH CAROLINA
- **Suzanne Buckley**  
  Executive Director  
  4711 Hope Valley Road  
  Suite 4F-509  
  Durham, NC 27707  
  P: 919.908.9321  
  [www.ProChoiceNC.org](http://www.ProChoiceNC.org)  
  [@NARALNC](https://twitter.com/NARALNC)

## NARAL PRO-CHOICE OHIO
- **Kellie Copeland**  
  Executive Director  
  12000 Shaker Boulevard  
  Cleveland, OH 44120  
  P: 216.283.2180  
  [www.prochoiceohio.org](http://www.prochoiceohio.org)  
  [@ProChoiceOH](https://twitter.com/ProChoiceOH)

## NARAL PRO-CHOICE OREGON
- **Michele Stranger Hunter**  
  Executive Director  
  P.O. Box 40472  
  Portland, OR 97240  
  P: 503.223.4510  
  [www.prochoiceoregon.org](http://www.prochoiceoregon.org)  
  [@ProChoiceOregon](https://twitter.com/ProChoiceOregon)

## NARAL PRO-CHOICE SOUTH DAKOTA
- **Abbie Peterson**  
  Executive Director  
  401 E. 8th Street  
  Suite 330G  
  Sioux Falls, SD 57103  
  P: 605.334.5065  
  [www.prochoicesd.org](http://www.prochoicesd.org)  
  [@NARALSD](https://twitter.com/NARALSD)

## NARAL PRO-CHOICE TEXAS
- **Heather Busby**  
  Executive Director  
  P.O. Box 684602  
  Austin, TX 78768  
  P: 512.462.1661  
  [www.prochoicetexas.org](http://www.prochoicetexas.org)  
  [@NARALTX](https://twitter.com/NARALTX)

## NARAL PRO-CHOICE VIRGINIA
- **Tarina Keene**  
  Executive Director  
  901 N. Washington Street  
  Suite 603  
  Alexandria, VA 22314  
  P: 571.970.2536  
  [www.naralva.org](http://www.naralva.org)  
  [@NARALVirginia](https://twitter.com/NARALVirginia)

## NARAL PRO-CHOICE WISCONSIN
- **Megin McDonell**  
  Board Chair  
  612 W. Main Street  
  Suite 200  
  Madison, WI 53703  
  P: 608.287.0016  
  [www.prochoicewisconsin.org](http://www.prochoicewisconsin.org)  
  [@NARALWI](https://twitter.com/NARALWI)

## NARAL PRO-CHOICE WYOMING
- **Sharon Breitweiser**  
  Executive Director  
  P.O. Box 271  
  Laramie, WY 82073  
  P: 307.742.9189  
  [www.prochoicewyoming.org](http://www.prochoicewyoming.org)
**NARAL PRO-CHOICE AMERICA
MISSION STATEMENT**

To develop and sustain a constituency that uses the political process to guarantee every woman the right to make personal decisions regarding the full range of reproductive choices, including preventing unintended pregnancy, bearing healthy children, and choosing legal abortion.

**NARAL PRO-CHOICE AMERICA FOUNDATION
MISSION STATEMENT**

To support and protect, as a fundamental right and value, a woman’s freedom to make personal decisions regarding the full range of reproductive choices through education, training, organizing, legal action, and public policy.