Who Decides?
The Status of Reproductive Freedom in the United States
The state of reproductive freedom in the United States is alarming. Due to the dearth of access in many regions, the nationwide status is “restricted access.” The colors represent the status of access to reproductive healthcare, such as abortion and contraception, in each state: a spectrum from bright red for “severely restricted access” to dark purple representing “total access.”

As shown below, a handful of states have made great strides in expanding and protecting access to reproductive healthcare, achieving the status of “strongly protected access.” Yet, no state has achieved “total access” at this time. The majority of the states are in red, which should serve as a warning about the lack of reproductive healthcare access in much of the nation.

**ACCESS FACT:** Currently, there are no states that provide total access.
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Supreme Court Justice Ruth Bader Ginsburg, a brilliant scholar and tireless champion for civil rights, reproductive freedom, and social justice, died in November after serving 27 years on the Supreme Court. She is deeply missed.

Justice Ginsburg knew that access to abortion is crucial. She wrote that a woman’s “ability to stand in relation to man, society, and the state as an independent, self-sustaining, equal citizen,” hinges on this right, and that no less than “a woman’s autonomous charge of her full life’s course” hangs in the balance.

Justice Ginsburg was a visionary, writing not just for today, but for the future, believing in our ability to construct a society where her wise dissents would become governing law.

When asked about Roe v. Wade and Planned Parenthood v. Casey, at her 1993 confirmation hearing, she responded clearly and forthrightly:

“The cases essentially pose the question: Who decides; is it the State or the individual? In Roe, the answer comes out: the individual, in consultation with her physician... The most recent decision, whatever else might be said about it, acknowledges that the woman decides.”

Justice Ginsburg was not only a titan of the judiciary, but a cultural icon, who inspired generations of women to trod the road she paved. We honor her legacy by fighting for everything she believed in. We hold fast to the principles she espoused every day by never ceasing to believe that a more just and equitable country is possible.

2020 was a difficult and challenging year. The country grappled with multiple intersecting crises: the Trump administration’s obstinate refusal to combat the COVID-19 pandemic, resulting in hundreds of thousands of deaths in the United States alone; an uprising led by racial justice leaders to drive a national reckoning around white supremacy, systemic racism, and racial violence; and a president who intentionally attacked the foundation of our democracy—our right to vote—by spreading disinformation about the electoral process in an effort to hold on to power regardless of the will of the people.

The related and compounding effect of these urgent issues was to lay bare the work that still needs to be done so that our families and communities can thrive. NARAL Pro-Choice America believes that there can be no reproductive freedom without freedom from tyranny and oppression, and we are working with our allies to fight for that ultimate goal.

This last year made crystal-clear that the anti-choice movement will not hesitate to subvert science and disregard our health and well-being in order to maintain control. Whether it was jamming through a U.S. Supreme Court justice days before a national election or explicitly peddling disinformation about the election, 2020 was the culmination of a decades-long effort by the Radical Right working in lockstep with the anti-choice movement to gut our democracy to maintain white patriarchal power.

While, some states exploited the pandemic to restrict access to time-sensitive and needed abortion care during already difficult times, reproductive freedom champions in other states moved proactively to protect access to abortion. In 2020, overall, less anti-choice legislation was enacted because of legislative closures in response to the pandemic. But legislators hostile to our fundamental rights introduced many of the same anti-choice measures as the year before—all with the intention of baiting the U.S. Supreme Court into overturning Roe v. Wade.

Thanks to the efforts of these anti-choice, anti-freedom legislators as well as Trump and Senate Majority Leader Mitch McConnell’s efforts to stack the federal judiciary with judges hostile to Roe, there’s no question that the years ahead will be perilous for reproductive freedom.

Just look back at 2019: After Brett Kavanaugh was confirmed to the Supreme Court and solidified a majority hostile to Roe, state lawmakers launched an all-out assault on abortion rights in hopes of rolling back the landmark decision. Bans on abortion were introduced, passed, or signed in 31 states in 2019 alone.

Now, Amy Coney Barrett’s illegitimate appointment to the Supreme Court has left us with an anti-choice supermajority of justices—and we can expect lawmakers hostile to our fundamental rights to redouble their work to end legal abortion.

Even while it stands, Roe has long been insufficient because a right without access is no right at all. There are many laws that put abortion out of reach for many in the United States, especially marginalized communities.

Freedom is for every body—and we’re committed to fighting for it. We’re proud that NARAL’s 2.5 million members remain on the front lines, organizing, lobbying, campaigning, and voting.

The stakes are higher than ever. As we look ahead to the future, we’re facing a pivotal moment in the movement for reproductive freedom. But you can be sure that NARAL Pro-Choice America and our members are paving the way for a more just and free future.

Onward,

Ilyse G. Hogue

President
NARAL Pro-Choice America Commemorates 30 Editions of Who Decides
2020 is a year when it’s useful to take a moment to appreciate the arc of history that stretches behind us and recommit to creating a future where we all have the freedom to make personal decisions about pregnancy and parenting that help us and our communities thrive.

1920 After decades of organizing, the U.S. Congress ratified the Nineteenth Amendment to the U.S. Constitution: “The right of citizens of the United States to vote shall not be denied or abridged by the United States or by any State on account of sex.” But, this right was only for some – women of color continued to organize and fight well into the 20th Century to obtain the right to vote.

1933 Ruth Bader Ginsburg was born in Brooklyn, New York.

1965 Griswold v. Connecticut - The Supreme Court recognized a “right of privacy” that encompasses the ability of married individuals to access contraception.

1969 NARAL established at the “First National Conference on Abortion Laws: Modification or Repeal?” in Chicago, originally called the National Association for the Repeal of Abortion Laws.

1972 Eisenstadt v. Baird - The Supreme Court recognized that unmarried people have the right to access contraception.

1973 Roe v. Wade - The Supreme Court recognized that pregnant people have the “fundamental right” to abortion.

1980 Harris v. McRae - The Supreme Court upheld a racist and discriminatory abortion coverage ban known as the Hyde Amendment, which prohibits federal reimbursement for abortion care for Medicaid beneficiaries except in limited circumstances, disproportionately harming people of color.


1992 Planned Parenthood v. Casey - While Roe v. Wade technically stands, the Supreme Court’s new “undue burden” standard opened the door for state legislatures to chip away at reproductive freedom.

2007 Gonzalez v. Carhart - The Supreme Court upheld a ban on a common procedure for second trimester abortion care.

2014 Burwell v. Hobby Lobby - The Supreme Court allowed closely-held corporations to block their employees’ access to no-copay birth control coverage as guaranteed by the Affordable Care Act (ACA) on the basis of religious objection.

2016 Whole Woman’s Health v. Hellerstedt - The Supreme Court struck down a Texas clinic shutdown law imposing medically unnecessary requirements on abortion providers because it imposed an “undue burden” on abortion access.

2020 The Supreme Court decided two cases that impact reproductive freedom:

June Medical Services v. Russo - The Supreme Court struck down a Louisiana clinic shutdown law imposing medically unnecessary requirements on abortion providers because it imposed an “undue burden” on abortion access. While the decision preserved abortion access in Louisiana for now, Chief Justice John Roberts’ concurrence left the door open for states to continue their attacks on reproductive freedom.

Trump v. Pennsylvania - The Supreme Court upheld the Trump administration’s authority to issue rules that allow virtually any employer or university to deny no-copay birth control coverage as guaranteed by the ACA on the basis of a religious or moral objection.
2020
Key Findings and
Political Landscape
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 constitutional provisions, statutes, regulations, court decisions, ballot measures, opinions of state attorneys general, state policies, and other governmental action with statewide effect.

**Key Findings: Expanding Reproductive Freedom in 2020**

**TOTAL MEASURES EXPANDING REPRODUCTIVE FREEDOM ENACTED IN 2020:**

23 STATES and the DISTRICT OF COLUMBIA enacted 63 measures supporting reproductive freedom in 2020—fewer than the 96 measures passed in 2019, though legislatures closed early due to the pandemic.

The states which passed proactive legislation this year include: AL, CA, CO, DE, DC, FL, GA, IL, LA, ME, MD, MA, MI, MN, NJ, NM, NY, SC, TN, UT, VA, VT, WA, WV.

- Virginia led the nation by enacting 11 measures supporting reproductive freedom.
- The District of Columbia followed with 7 measures supporting reproductive freedom.
- And New Jersey enacted 6 measures supporting reproductive freedom.

**KEY VICTORIES EXPANDING REPRODUCTIVE FREEDOM IN 2020:**

- Virginia passed the Reproductive Health Protection Act, repealing many longstanding restrictions on abortion in the state, including mandates that people who are pregnant receive biased counseling, undergo a mandatory ultrasound, and wait at least 24 hours prior to an abortion. The law also repealed unnecessary restrictions requiring abortion care facilities to be regulated as hospitals, and expands scope of practice for nurse practitioners to perform first trimester abortion care.
- The Massachusetts state legislature overrode Governor Charlie Baker’s veto to enact legislation that removes critical barriers to accessing abortion care in Massachusetts. The law codifies the right to abortion in state law, improves access to abortion later in pregnancy in cases of lethal fetal diagnosis, expands access to abortion for young people, and codifies expanded scope of practice for qualified advanced practice clinicians to perform abortion care.
- The District of Columbia codified the right to abortion, contraception, sterilization, infertility treatment, and pregnancy-related care. DC joined Oregon and Vermont to expand protections beyond Roe v. Wade by prohibiting government interference in these services. The measure also prohibits punishing people who self-manage abortion care or experience miscarriage or adverse pregnancy outcomes, and prohibits discrimination against healthcare professionals that provide abortion or sterilization care.
- This year voters in Colorado defeated a proposed ban on abortion later in pregnancy that would have forced someone to carry a pregnancy to term with no exceptions for risks to health, a lethal fetal diagnosis, or even in cases of rape.

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 action with statewide effect.
• California removed an outdated physician supervision requirement for Certified Nurse-Midwives, improving pregnancy and birth outcomes and expanding access to affordable, high-quality abortion care.

• The attorney general in Maryland issued an opinion stating that the law expands scope of practice for advanced clinicians to provide medication abortion care.

• Bills promoting healthy pregnancy again accounted for the largest percentage of measures expanding reproductive freedom, finding traction even in states hostile to reproductive freedom. 19 STATES and the DISTRICT OF COLUMBIA passed 42 measures to promote healthy pregnancy: AL, CA, CO, DE, DC, FL, GA, LA, ME, MD, NJ, NM, NY, SC, TN, UT, VT, VA, WA, WV.

  ○ Georgia passed a bill expanding Medicaid coverage for postpartum care and lactation services.
  ○ Maryland, New Mexico, Tennessee, and Virginia enacted measures requiring employers to provide reasonable accommodations to pregnant working people.
  ○ Alabama, Maine, Maryland, New York, Tennessee, Vermont, Virginia, West Virginia and the District of Columbia passed measures expanding the scope of, or funding for, maternal mortality review committees.
  ○ New Jersey passed a bill to study the effects of racial and ethnic disparities on the sexual and reproductive health of African-American women.
  ○ 4 states, California, Colorado (by ballot measure), Utah, and Washington expanded paid family leave.
  ○ 7 states, California, Florida, Louisiana, New Jersey, South Carolina, Tennessee, and Virginia enacted legislation to expand protections for incarcerated pregnant people.

• Several states passed measures expanding access to contraception:

  ○ Vermont amended its law to allow pharmacists to prescribe hormonal contraception and to require insurers to cover it; Vermont’s law also requires high schools to make cost-free condoms available to students.
  ○ Minnesota and Virginia enacted legislation to allow pharmacists to prescribe contraception, but with significant limitations for people under 18, who are still required to obtain a prescription, at least initially, from a physician.
  ○ West Virginia joined 18 states and the District of Columbia by allowing pharmacists to dispense 12 months of contraception at once, and enacted legislation expanding Medicaid coverage for long-acting reversible contraceptive methods (LARCs), without requiring medically unnecessary office visits.
  ○ New Jersey required health insurance plans to cover all-FDA approved contraceptive products, without cost sharing.
  ○ The District of Columbia, Illinois, and Virginia passed measures expanding access to emergency contraception.

• Washington enacted legislation requiring public schools to provide comprehensive sexual education that is evidence-informed, medically and scientifically accurate, age-appropriate, and inclusive for all students. The curriculum must include affirmative consent and bystander training.

• Washington passed legislation that protects healthcare providers from employment discrimination and does not allow the healthcare entity to limit the provider’s provision of medically accurate and comprehensive information, notwithstanding their employer’s religious beliefs.

• New Jersey enacted legislation to replace $9.5 million in family planning funding lost to organizations that previously participated in the federal Title X family planning program, but that had lost eligibility as a result of Trump’s domestic gag rule, which resulted in defunding family planning providers across the country.
Key Findings: Restricting Reproductive Freedom in 2020

TOTAL MEASURES RESTRICTING REPRODUCTIVE FREEDOM ENACTED IN 2020:

14 STATES enacted 18 measures restricting reproductive freedom: CO, FL, ID, IN, IA, LA, MS, NE, OH, OK, PA, TN, UT, WV.

Legislatures nationwide adjourned early in 2020 as a result of the COVID-19 pandemic, undoubtedly hampering legislative activity.

In 2019, 23 STATES enacted 50 measures restricting reproductive freedom and in 2018, 22 STATES also enacted 50 anti-choice measures.

Since NARAL began tallying anti-choice measures in 1995, states have enacted 1,108 measures restricting reproductive freedom.

STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM IN 2020:

- Idaho and Utah both passed trigger bans that will criminalize abortion automatically if Roe v. Wade is overturned.
- Tennessee passed the most expansive anti-choice bill this year. With a nod to their existing trigger ban, the law bans abortion at as many points in pregnancy as possible—24, 23, 22, 21, 20, 18, 15, 12, 10, 8, and as few as 6 weeks of pregnancy—if courts allow it. Under the law, pregnant people must undergo a mandatory ultrasound to receive care, even if medically unnecessary. Legislators also included bans on abortion based on the reason the pregnant person is seeking care. The law, which subjects doctors who provide abortion care to criminal penalties, also requires providers to counsel pregnant patients about unproven claims that it is possible to “reverse” a medication abortion. This legislation was immediately challenged in court.
- Mississippi also enacted a ban on abortion based on the reason the pregnant person is seeking care.
- Florida enacted legislation requiring people under 18 to obtain consent from a parent or legal guardian in order to receive abortion care. Existing law already required parental notification. The new law requires a notarized record of the guardian’s consent along with a copy of their government-issued identification. The law contains a judicial bypass procedure whereby young people can make a case to a judge about why parental consent is not warranted.
- Louisiana voters approved a ballot measure in November to amend the state constitution to make clear that it does not protect the right to abortion or require public coverage of abortion care.
Iowa amended its law imposing a mandatory delay before a person can obtain an abortion. In 2018, the Iowa Supreme Court held that a 72-hour waiting period violated the state constitution. Pursuant to the law as amended this year, a person must wait 24-hours after giving written consent for the care, still requiring the person to make a second trip to the clinic. The only exception is for life-threatening or severe medical emergencies.

Oklahoma enacted inflammatory legislation allowing the would-have-been parent or grandparent of a fetus, termed an “unborn person” in the bill, to initiate litigation against an abortion care provider. The measure is meant to shut down clinics in the state by allowing them to be sued.

Nebraska banned the standard method for providing second trimester abortion care.

Indiana, Ohio, and Utah enacted measures imposing restrictions on how abortion care providers dispose of fetal tissue.

West Virginia passed an inflammatory law that inserts politicians into family decisions. The law elevates health disinformation, attacks healthcare providers, and is intended to shame those who need abortion care later in pregnancy. Similar bills were passed in Wyoming and Kentucky, but were vetoed by the states’ governors.

Three states passed laws directing funding to fake women’s health centers: Florida, Idaho, and Pennsylvania.

Colorado expanded health benefit plans issued or renewed in the state on or after January 1, 2022, to cover diagnosis of infertility, treatment for infertility, and fertility preservation services, but included a provision allowing religious employers to refuse to comply if the coverage conflicts with the organization’s religious beliefs and practices.
**Political Landscape: State Government**

**OVERVIEW:**
- **15 STATES** and the DISTRICT OF COLUMBIA have governments that support reproductive freedom (both the governor and the majority of the legislature support reproductive freedom): CA, CO, CT, DE, DC, HI, IL, ME, NV, NJ, NM, NY, OR, VT, VA, WA.
- **11 STATES** have governments with mixed support for reproductive freedom: KS, KY, MD, MA, MI, MN, MT, NC, PA, RI, WI.
- **24 STATES** have governments that oppose reproductive freedom (both the governor and the majority of the legislature oppose reproductive freedom): AL, AK, AZ, AR, FL, GA, ID, IN, IA, LA, MS, MO, NE, NH, ND, OH, OK, SC, SD, TN, TX, UT, WV, WY.

**STATE EXECUTIVE: Position on Reproductive Freedom**
- **23 GOVERNORS** and the MAYOR of the DISTRICT OF COLUMBIA support reproductive freedom: CA, CO, CT, DE, DC, HI, IL, KS, KY, ME, MI, MN, NV, NJ, NM, NY, NC, OR, PA, RI, VT, VA, WA, WI.
- **2 GOVERNORS** have mixed support for reproductive freedom: MD, MA.
- **25 GOVERNORS** oppose reproductive freedom: AL, AK, AZ, AR, FL, GA, ID, IN, IA, LA, MS, MO, MT, NE, NH, ND, OH, OK, SC, SD, TN, TX, UT, WV, WY.
STATE LEGISLATURES:
Legislatures that oppose reproductive freedom outnumber legislatures that support it

- **17 STATES** and the **DISTRICT OF COLUMBIA** have legislatures that support reproductive freedom (both the state house and senate support reproductive freedom): CA, CO, CT, DE, DC, HI, IL, ME, MD, MA, NV, NJ, NM, NY, OR, VT, VA, WA.

- **3 STATES** have legislatures with mixed support for reproductive freedom: MN, RI, MT.

- **30 STATES** have legislatures that oppose reproductive freedom (both the state house and senate oppose reproductive freedom): AL, AK, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MS, MO, NE, NH, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, WV, WI, WY.

STATE SENATES¹: Position on Reproductive Freedom

- **18 Support Reproductive Freedom:** CA, CO, CT, DE, HI, IL, ME, MD, MA, NV, NJ, NM, NY, OR, VT, VA, WA.

- **2 Mixed Support for Reproductive Freedom:** MT, RI.

- **31 Oppose Reproductive Freedom:** AL, AK, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MN, MS, MO, NE, NH, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, WV, WI, WY.

STATE HOUSES: Position on Reproductive Freedom

- **19 Support Reproductive Freedom:** CA, CO, CT, DE, HI, IL, ME, MD, MA, MN, NV, NJ, NM, NY, OR, RI, VT, VA, WA.

- **1 Mixed Support for Reproductive Freedom:** MT.

- **28 Oppose Reproductive Freedom:** AL, AK, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MS, MO, NH, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, WV, WI, WY.

¹ Includes Nebraska’s unicameral body and the District of Columbia’s city council.
Fast Facts
Abortion Rights: Protections and Bans
Post-Roe Outlook: Abortion in the States

In its landmark 1973 decision, Roe v. Wade, the U.S. Supreme Court held that the right to abortion is a fundamental constitutional right. With the appointment of three Trump justices, the Supreme Court now has a supermajority hostile to reproductive freedom and many fear that Roe will be overturned. What would a world after Roe look like?

At the federal level every year since it was introduced in 2013, NARAL Pro-Choice America has urged the U.S. Congress to pass the Women’s Health Protection Act, which would provide a federal statutory right to abortion, free from unnecessary restrictions and bans.

Without federal protection, if the Supreme Court overturns Roe, the regulation of abortion—its legality and accessibility—would completely fall to state law.

**STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:**

9 STATES still have a near-total criminal ban on abortion that was enacted before Roe v. Wade: AL, AZ, AR, MI, MS, NM, OK, WV, WI.

- The enforcement of these state laws is blocked by Roe v. Wade. If Roe v. Wade is overturned, these laws could go into effect.

10 STATES have enacted trigger laws that would impose a near-total criminal ban on abortion if Roe is overturned: AR, ID, KY, LA, MS, MO, ND, SD, TN, UT.

4 STATES have amended their constitutions to make clear that they do not protect the right to abortion: AL, LA, TN, WV.

7 STATES have articulated in law their interest in restricting abortion to the maximum extent allowed by the Supreme Court: AR, KS, KY, LA, MO, ND, OH.

**2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:**

2 STATES enacted trigger laws to criminalize abortion if Roe is overturned: ID, UT.

1 STATE approved a ballot initiative to amend its constitution to preclude a right to abortion: LA.

**STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:**

14 STATES and the DISTRICT OF COLUMBIA have codified the right to abortion in state law: CA, CT, DE, DC, HI, IL, ME, MD, MA, NV, NY, OR, RI, VT, WA.

9 STATES protect the right to abortion within their state constitutions: AK, CA, FL, IA, KS, MA, MN, MT, NJ.

**2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:**

1 STATE and the DISTRICT OF COLUMBIA enacted measures to improve protections for abortion access: DC, MA.
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**TOTAL**  
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Bans on Abortion by Week

The Supreme Court has long held that a person has the right to seek abortion care until the point of fetal viability. Despite this, states hostile to reproductive freedom have pushed bans on abortion at various arbitrary points in pregnancy. In 2019 alone, nine states passed these types of abortion bans. These unconstitutional bans on abortion are direct challenges to Roe v. Wade. They were passed with the intention of overturning the constitutional right to abortion.

Last year, anti-choice politicians in Missouri passed the first law that included multiple gestational bans at different points in pregnancy in the same bill. This year, despite the pandemic, Tennessee managed to pass a bill banning abortion at as many points in pregnancy as possible—at 24, 23, 22, 21, 20, 18, 15, 12, 10, 8, and as early as 6 weeks. The anti-choice politicians who introduced the bill specifically said their goal was to give the state “multiple shots” at ending Roe v. Wade. In Missouri and Tennessee, like other states, courts immediately blocked the unconstitutional abortion bans from taking effect. Despite all these attempts, abortion is still legal in all 50 states because the courts have thus far upheld the constitutional right to abortion.

19 STATES ban abortion after 22 weeks with only very narrow exceptions: AL, AR, GA, ID*, IN, IA, KS, KY, LA, NE, ND, OH, OK, SC, SD, TN*, TX, WV, WI.

5 STATES ban abortion after 20 weeks with only very narrow exceptions: AZ*, MS, MO*, NC*, TN*.

4 STATES have a ban on abortion at 18 weeks: AR, MO*, TN*, UT*.

3 STATES have a ban on abortion after 15 weeks: LA, MS, TN*.

- Louisiana’s ban on abortion after 15 weeks will not go into effect unless similar laws in MS are upheld by the Fifth Circuit Court of Appeals.

1 STATE has a ban on abortion after 14 weeks: MO*.

2 STATES have a ban on abortion after 12 weeks: AR*, TN*.

1 STATE has a ban on abortion after 10 weeks: TN*.

2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

- 1 STATE enacted a measure with cascading gestational bans on abortion: TN.

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1 For consistency, all weeks here are measured using the pregnant person’s last menstrual period (LMP). Most doctors use LMP to measure pregnancy, as do many states. Other states define “commencement” of pregnancy as two weeks after LMP, when conception is likely to have occurred.
Bans Based on Method of Abortion Care

One avenue of undermining abortion rights is for politicians to interfere with how doctors care for their patients. Using intentionally inflammatory language, politicians hostile to reproductive freedom have worked to ban particular methods of providing safe abortion care as part of a larger national strategy to block access altogether.

These restrictions ban care people need and doctors recommend. Healthcare providers must be able to use their best medical judgment, not have politicians dictate the care they provide. There is no valid reason to deny providers the ability to use particular methods of care. The only reason is political, not medical.

STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

31 STATES ban abortion as early as 12 weeks, with no exception to protect a person’s health, through a ban on the dilation and extraction (D&X) procedure: AL, AK, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MS, MO, MT, NE, NH, NJ, NM, ND, OH, OK, SC, SD, TN, TX, UT, VA, WV, WI.

- 1 STATE bans this safe abortion procedure with only a narrow health exception: OH.
- The Federal Abortion Ban that became law in 2007 supersedes the state laws.

13 STATES the standard method for abortion care after about 14-15 weeks of pregnancy, dilation & evacuation (D&E): AL, AR, IN, KS, KY, LA, MS, NE, ND, OH, OK, SC, SD, TN, TX, UT, VA, WV.

- 9 STATES’ laws have been temporarily or permanently enjoined: AL, AR, IN, KS, KY, LA, OH, OK, TX.
- ND’s D&E ban will go into effect only if Roe is overturned.

2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

1 STATE enacted a ban on D&E abortion: NE.
Bans Based on the Reason a Person May Seek Abortion Care

In yet another strategy to ban abortion by any means necessary, state governments hostile to reproductive freedom have worked to enact extreme bans on abortion that hold providers legally liable for the reasons a person may seek care. These reasons may include the potential race and sex of the pregnancy or in cases of fetal diagnosis. These bans not only restrict access and target people of color, but also force providers to interrogate a person’s motives for seeking abortion care—something that does not belong in the doctor-patient relationship nor should be dictated by politicians.

STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

16 STATES have reasons-based bans on abortion: AZ, AR, IN, KS, KY, LA, MS, MO, NC, ND, OH, OK, PA, SD, TN, UT.

6 OF THESE STATES ban abortion if sought based on race: AZ, IN*, KY*, MS, MO, TN.

- 13 OF THESE STATES ban abortion if sought based on sex: AZ, AR, IN*, KS, KY*, MS, MO, NC, ND, OK, PA, SD, TN.
- 10 OF THESE STATES ban abortion if sought for reasons of fetal diagnosis: AR, IN, KY, LA, MS*, MO*, ND*, OH*, TN*, UT.
  - *These laws have been temporarily or permanently enjoined.
  - UT’s law will go in effect only if a court of binding authority holds that it is lawful.

2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

2 STATES enacted a ban on abortion if sought based on race: MS, TN.

2 STATES enacted a ban on abortion if sought based on sex: MS, TN.

2 STATES enacted a ban on abortion if sought for reasons of fetal diagnosis: MS, TN.
COVID-19 and Reproductive Freedom

The COVID-19 pandemic gripped the world and the United States in 2020. Reproductive freedom was once again at the forefront—both in states actively protecting access to abortion and states that used the pandemic as an excuse to restrict access to abortion.

The anti-choice movement is obsessed with advancing their ideological agenda and ending legal abortion. They exploited the COVID-19 pandemic to advance that goal, prioritizing personal beliefs over science and using health disinformation to manipulate people at a time when we needed accurate information from doctors and experts more than ever. It is clear that this was an ideological attack on our fundamental rights—the states in which officials attempted to restrict access to abortion during the COVID-19 pandemic all introduced or enacted abortion bans and restrictions in recent years.

While some states spent their time restricting time-sensitive and needed care during a public health emergency, other states acted proactively to protect access to abortion.

![Map of the United States highlighting states that attempted to restrict access to abortion vs. states that protected access to abortion during the COVID-19 pandemic.]

### 2020 ENACTED STATE MEASURES

**RESTRICTING REPRODUCTIVE FREEDOM:**

During the COVID-19 pandemic, anti-choice officials in 13 STATES attempted to restrict access to abortion care: AL, AK, AR, IN, IA, KY, LA, MS, OH, OK, TN, TX, WV.

- None of the COVID-19 executive orders issued in 2020 restricting access to abortion care are still in effect.

**EXPANDING REPRODUCTIVE FREEDOM:**

12 STATES protected access to abortion care during the pandemic: DE, HI, IL, MA, MN, MT, NJ, NM, NY, OR, VA, WA.
Fast Facts

Abortion Rights: Access and Restrictions
Expanded Scope of Practice

Everybody should have the freedom to access the time-sensitive abortion care they need no matter where they live—and expanding the scope of trusted, qualified medical professionals who can provide abortion care is a critical component of helping to make that a reality. According to the Guttmacher Institute, 89% of counties in the United States in 2017 did not have a known clinic. Expanding the type of providers who can offer abortion care is one way to expand access to abortion care, particularly in rural areas.

Advanced practice clinicians, such as advanced practice nurses and physicians assistants, are highly-trained, qualified, and already-licensed healthcare providers who can provide abortion care to people in their communities. Some states choose to expand access to abortion care by expanding the scope of practice for advanced practice clinicians to provide medication abortion, procedural abortion care, or both. Expanding scope of practice is critical to expanding access to abortion across the country.

**STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:**

13 STATES have expressly expanded the scope of practice for some advanced practice clinicians (APCs) to include some abortion services: CA, CT, IL, ME, MD, MA, MT, NM, NY, OR, RI, VA, WA.

- 12 STATES have expressly expanded the scope of practice for some APCs to provide medication abortion care: CA, CT, IL, ME, MD, MA, MT, NM, NY, RI, VA, WA.
- 9 STATES have expressly expanded the scope of practice for some APCs to provide procedural abortion care: CA, IL, ME, MA, MT, NY, OR, VA, WA.

6 additional STATES and the DISTRICT OF COLUMBIA allow some APCs to provide some abortion care: CO, DC, HI, NH, NJ, VT, WV.

**2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:**

3 STATES enacted measures that allow advanced practice clinicians to provide abortion care: MD, MA, VA.

1 STATE enacted a measure removing the physician supervision requirement for certified nurse midwives, who are able to provide abortion care: CA.
Emergency Contraception

Emergency contraception (EC) is birth control that can be used soon after sex to prevent a pregnancy before it occurs. This means that EC is different from medication abortion in that it has no effect on an existing pregnancy. There are several types of Food and Drug Administration-approved methods of EC, including some that are approved for over-the-counter sale to people of all ages. Despite the fact that the anti-choice movement has continued to attack access to EC by intentionally spreading disinformation about how it works, many states have taken proactive steps to expand access, particularly for survivors of sexual assault.

STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

19 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, MI, MN, NJ, NY, OR, PA, SC, TX, VA, WA, WI.

- PA’s law to make EC available in hospital emergency rooms does not appear in the above count because it includes a significant refusal clause that makes access to the medication effectively unavailable.

2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

2 STATES and the DISTRICT OF COLUMBIA enacted measures to improve access to EC in hospital emergency rooms: DC, IL, VA.
Clinic Protections

Patients and abortion providers’ real-world experiences have shown the lengths to which the anti-choice movement is willing to go to achieve their goal of ending access to abortion. The long history of clinic violence and the increase in threats and violence against patients and providers demonstrates the need for clinic protections.

Measures protecting patients and providers from violence and intimidation are critical to preserving access to abortion care and ensuring that clinics remain open. While most states that protect against clinic violence have laws that criminalize interference with access to healthcare facilities, some have proactive laws—bubble zones—that guarantee staff and patients can enter the clinic without obstruction.

STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

18 STATES and the DISTRICT OF COLUMBIA have measures that protect healthcare facilities, providers, and/or patients from blockades, harassment, and/or other anti-choice violence: CA, CO, CT, DC, KS, ME, MD, MA, MI, MN, MT, NV, NH, NJ, NY, NC, OR, WA, WI.

- 3 STATES have proactive laws that protect patients and clinic personnel from unwanted harassment within specified distances from clinics: CO, MT, NH.
  - 1 STATE has a buffer zone law that is currently not enforced: NH.
Guarantees and Refusals of Care

Thus far, unable to make abortion illegal, lawmakers hostile to reproductive freedom have enacted a wide variety of laws to try to make abortion and other reproductive healthcare unavailable.

Laws allowing refusals of healthcare, coverage, referrals, and information by a broad range of individuals and institutions—including hospitals, healthcare providers, pharmacists, employers, and insurance companies—based on a religious or moral objection are a significant barrier to care. This is particularly true for those who already face disproportionate obstacles such as Black, Indigenous, communities of color, young people, LGBTQ people, and more.

Some states have taken action to guarantee access to care and ensure the personal beliefs of an institution or individual do not impede someone’s ability to get the healthcare and information they need.

### STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

48 STATES and the DISTRICT OF COLUMBIA allow certain individuals or organizations to refuse to provide specific reproductive-health services, information, or referrals: AL, 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.

### STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

7 STATES guarantee that a person’s birth control prescriptions will be filled: CA, IL, ME, NV, NJ, WA, WI.

2 STATES and the DISTRICT OF COLUMBIA guarantee that employees cannot be discriminated against because of a reproductive-health decision: DE, DC, NY.

1 STATE protects a healthcare professional’s participation in abortion or sterilization procedures: DC.

2 STATES allow providers in religious health care systems to give patients comprehensive information and resources about their health status and options: IL, WA.

### 2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

1 STATE enacted a measure expanding employment discrimination protections to include a healthcare professional’s participation in abortion or sterilization procedures: DC.

1 STATE enacted a measure that allows providers in religious healthcare systems to give patients comprehensive information and resources about their health status and options: WA.

*This issue area includes multiple overlapping policy measures, thus the process of researching and documenting current measures is ongoing.
Clinic Shutdown Laws

In addition to direct attacks on Roe v. Wade, for years, politicians hostile to reproductive freedom have worked to incrementally chip away at the right to abortion through a series of restrictions intended to close clinics and push access out of reach.

The anti-choice movement pushes medically unnecessary restrictions on clinics and doctors who provide abortion care under the guise of protecting patient safety—but they are nothing more than a thinly veiled attempt to erect barriers and block access to abortion care through excessive and costly mandates designed to shut down clinics.

Clinic shutdown laws, also known as targeted restrictions of abortion providers (TRAP), often include arbitrary and medically unnecessary requirements, such as restrictions that force clinics to needlessly convert into ambulatory surgical centers, or mini-hospitals, at great expense. Other common TRAP restrictions include those that limit the provision of care only to physicians or to hospital settings, require abortion providers to obtain admitting privileges at nearby hospitals, or require facilities to have a transfer agreement with a local hospital (with nothing requiring hospitals to grant such privileges).

STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

38 STATES have TRAP measures subjecting abortion providers to restrictions not imposed on other medical professionals: AL, AK, AZ, AR, CT, DE, FL, GA, ID, IN, IA, IL, KS, KY, LA, MD, MI, MN, MS, MO, NE, NV, NJ, NM, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, WA, WI, WY.

• 16 STATES have enacted measures unnecessarily requiring abortion providers to have admitting privileges at a hospital, though hospitals are not required to consider or grant the request: AL, AZ, AR, FL, IN, KS*, LA*, MO, NJ, ND, OK, SC, TN*, TX, WI*.

* These measures are temporarily or permanently enjoined.

2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

1 STATE enacted a measure to repeal restrictions on abortion providers that are not imposed on other medical professionals: VA.
Young People & Abortion

Most states require young people to notify or even obtain consent from one or both parents before they can receive abortion care. While most young people talk with at least one parent when facing an unintended pregnancy, others cannot. Some young people do not have access to their parents or are afraid of anger or abuse. In these situations, young people deserve access to healthcare providers who can offer counseling and the safe medical care they need, not abortion restrictions. All people, including young people, deserve to make decisions for themselves about if, when, and how to become a parent.

Mandatory notification and consent laws disproportionately impact young people of color and immigrant youth, who already face barriers to care. These restrictions force many young people into unsafe situations. They may delay accessing critical care, have to travel out of state, or end up in avoidable and unsafe situations. Laws can’t force young people to talk to their parents—but they may force them into decisions that endanger their health and well-being. Of course, most parents hope their children will seek out their advice and support, but responsible parents want, above all, for their children to be safe.

STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

44 STATES have parental-notice or -consent measures that restrict young people’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.

- 31 STATES require parental consent: AL, AZ, AR, CA*, FL, ID, IN, KS, KY, LA, ME, MA, MI, MS, MO, MT*, NE, NM*, NC, ND, OH, OK, PA, RI, SC, TN, TX, UT, VA, WI, WY.
- 19 STATES require parental notice: AK*, CO, DE, FL, GA, IL, IA, MD, MN, NV*, NH, NJ*, OK, SD, TX, UT, VA, WV, WY.
- 6 OF THESE STATES require both parental notice and consent: FL, OK, TX, UT, VA, WY.
- 12 OF THESE STATES have parental-notice and/or -consent measures that, in some cases, permit other trusted adults to stand in for a parent: CO, DE, IL, IA, ME, MD, NE, NC, PA, SC, VA, WI.

* These measures have been found unconstitutional and unenforceable.

2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

1 STATE enacted a measure requiring parental consent: FL.

2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

1 STATE enacted a measure partially repealing the state’s parental consent law for 16- and 17-year-olds and streamlining the judicial bypass process for people under 16 by allowing remote hearings: MA.
Biased Counseling and Mandatory Delays

In 1992, in *Planned Parenthood v. Casey*, the Supreme Court affirmed that there should be no “undue burden” placed on a person’s right to abortion. But since then, politicians hostile to reproductive freedom nationwide have passed medically unnecessary and politically-motivated restrictions, creating a web of barriers that push abortion care out of reach.

Through biased counseling laws, politicians seek to shame and intimidate people seeking abortion care by requiring providers to disseminate medically inaccurate information, unproven claims, and propaganda. These paternalistic mandates insult pregnant people, implying they are not capable of making decisions for themselves.

Mandatory delay laws, which often force pregnant people to make two trips to a clinic, create additional burdens for people seeking abortion care and serve no medical purpose. These laws particularly harm those in rural areas who often have to travel for many hours to reach a healthcare provider, and those who do not have the resources to take extra time off of work or to pay for child care.

**STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:**

30 STATES have laws that subject people seeking abortion care to biased counseling requirements: AL, AK, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MN, MS, MO, NE, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, WV, WI.

- 9 STATES have laws requiring providers to provide medically unproven information on the ability to “reverse” a medication abortion: AR, ID, KY, NE, ND, OK, SD, TN, UT.

29 STATES have laws that force people to endure mandatory delays before accessing abortion care: AL, AZ, AR, FL, GA, ID, IN, IA, KS, KY, LA, MI, MN, MS, MO, MT, NE, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, WV, WI.

3 STATES’ biased counseling and mandatory delay laws have been found fully or partially unconstitutional: FL, MT, TN.

**2020 ENACTED STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:**

2 STATES enacted measures requiring a mandatory delay: IA*, TN.

- *The Iowa legislature replaced the 72-hour mandatory delay law, which was enjoined in 2018, with a 24-hour delay, which has been preliminarily enjoined in state court.

1 STATE enacted legislation that subjects people seeking abortion services to biased counseling requirements: TN.

**2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:**

2 STATES repealed provisions mandating biased counseling and mandatory delays: MA, VA.
Counseling and Referral Bans

“Gag rules,” sometimes called counseling and referral bans, typically prohibit organizations that receive state and/or federal funds from counseling or referring people for abortion care. In March 2019, the Trump administration published a new restriction blocking the availability of federal funds to family planning providers, such as Planned Parenthood, if they also offered abortion care—known as the domestic gag rule. The restriction required providers receiving these funds to refer all people who are pregnant to prenatal care even if a patient wants to end the pregnancy.

Counseling and referral bans similarly exist in the laws of some states. Beyond prohibiting the use of state funds for abortion care, states with these gag rules refuse to allow providers who receive state funds to refer pregnant people to abortion providers or provide information about abortion services—even if the state funds are not used.

To make the best decisions for their lives, families, and circumstances, people must have access to full, complete, and accurate information about their options.

STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

21 STATES have measures that prohibit some or all state employees or organizations that receive state funds from counseling or referring for abortion care: AL, AZ, AR, IL, IN, KS, KY, LA, MI, MN, MS, MO, NE, ND, OH, OK, PA, SC, TX, VA, WI.

- 1 STATE prohibition has been held partially unconstitutional: ND.
Fast Facts

Reproductive Health Coverage: Guarantees and Restrictions
Private Coverage of Contraception

Measures promoting comprehensive insurance coverage of contraception are crucial to reproductive freedom.

Thanks to the Affordable Care Act (ACA), private insurance plans must cover all Food and Drug Administration-approved contraceptive methods without additional out-of-pocket costs. This means that people can make decisions about what the best method of birth control is for them, without worrying about cost constraints. Though the birth control benefit helped millions of people, the Trump administration undermined it by allowing virtually any employer or university to opt out of coverage.

Many states have enacted policies that promote and improve insurance coverage for contraception. One such policy is known as contraceptive equity: Insurers must cover prescription contraception to the same extent as other medications. More recently, states have begun going beyond contraceptive equity and are codifying the ACA’s birth control benefit into state law. Some states even require that insurers cover a broader range of contraceptives without cost-sharing than is required under the ACA and/or cover a year’s supply of contraception dispensed at once. These measures are an important backstop to the federal law and allow states to ensure more robust coverage of contraception.

STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

26 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, NY, NC, OR, RI, VT, WA, WV, WI.

7 STATES have codified the ACA’s contraceptive-coverage policy requiring insurers to cover all 18 FDA-approved contraceptive methods without cost sharing: DE, ME, NV, NH, NM, VT, VA.

9 STATES and the DISTRICT OF COLUMBIA require that health insurance plans cover each unique contraceptive product without cost sharing: CA, CT, DC, IL, MD, MA, NJ, NY, OR, WA.

20 STATES and the DISTRICT OF COLUMBIA require that health insurance plans cover multiple months of contraception dispensed at once: CA, CO, CT, DE, DC, HI, IL, ME, MD, MA, NV, NH, NJ, NM, NY, OR, RI, VT, VA, WA, WV.

- 17 STATES and the DISTRICT OF COLUMBIA require coverage of 12 months of contraception dispensed at once: CA, CO, CT, DE, DC, HI, IL, ME, MD, MA, NV, NH, OR, RI, VT, VA, WA, WV.

- 2 STATES require coverage of six months of contraception dispensed at once: NJ, NM.

2020 ENACTED MEASURES EXPANDING REPRODUCTIVE FREEDOM:

1 STATE enacted a measure to require health insurance plans to cover all 18 FDA-approved contraceptive methods without cost sharing: VA.

1 STATE enacted a measure to require health insurance plans to cover each unique contraceptive product without cost sharing: NJ.

1 STATE enacted a measure to require health insurance plans to cover multiple months of contraception dispensed at once: WV.
Public Coverage of Contraception

Cost is one of the most significant barriers to accessing reproductive healthcare in the United States. Medicaid, which provides insurance to many low-income individuals, is the single largest funding source for family planning services in the United States.

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. States may apply for a waiver from the federal government to expand eligibility, but the waiver is subject to continuous review and modification. To streamline enrollment and reduce administrative costs, under the Affordable Care Act, states may submit a State Plan Amendment (SPA) to expand access to their family planning program under Medicaid permanently.

**STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:**

26 STATES, as of August 2020, provided expanded access to Medicaid coverage for family-planning services: AL, CA, CT, FL, GA, IN, LA, ME, MD, MN, MS, MT, NH, NJ, NM, NY, NC, OK, OR, PA, RI, SC, VA, WA, WI, WY.

- 9 STATES provided this coverage through a waiver obtained from the federal government: AL, FL, GA, MS, MT, OR, RI, WA, WY.
- 17 STATES provided this coverage through a SPA: CA, CT, IN, LA, ME, MD, MN, NH, NJ, NM, NY, NC, OK, PA, SC, VA, WI.

15 STATES and the DISTRICT OF COLUMBIA provide Medicaid coverage of 12 months of contraception dispensed at once: CA, CO, DE, DC, HI, MD, MA, NV, NH, NM, NY, OR, SD, TX, VT, WA.

7 STATES provide Medicaid coverage of over-the-counter emergency contraception: DE, IL, MD, MA, NY, OR, WA.

2020 ENACTED STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

1 STATE enacted measures expanding access to Medicaid coverage for family planning services: NJ.
Private Coverage of Abortion

Several states specifically target coverage of abortion care by private insurance plans. Politicians hostile to reproductive freedom have enacted laws that prohibit insurance companies from covering abortion care in the state insurance exchanges and even in the state's entire private insurance market. This puts abortion care financially out of reach for too many people—which is the exact purpose of these abortion coverage bans.

Conversely, measures that guarantee coverage for abortion ensure that people have access to the safe, comprehensive care they need. Such laws recognize that abortion is a vital part of a range of reproductive healthcare.

STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

6 STATES have measures supporting insurance coverage for abortion care: CA, IL, ME, NY, OR, WA.

- 3 STATES have measures guaranteeing insurance coverage for abortion services: CA, NY, OR.
- 3 STATES have measures requiring insurers that cover maternity services to also cover abortion services: IL, ME, WA.

STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

26 STATES prohibit insurance plans from covering abortion services in all or some of the private insurance market: AL, AZ, AR, FL, GA, ID, IN, KS, KY, LA, MI, MS, MO, NE, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, VA, WI.

- 11 STATES expressly prohibit abortion coverage in the entire private insurance market: ID, IN, KS, KY, MI, MO, NE, ND, OK, TX, UT.
- 24 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, TX*, UT, VA, WI.

*Although Texas does not have a state exchange, this measure prohibits abortion coverage in the event an exchange is established.
Public Coverage of Abortion

Since it was first passed in 1976, racist and discriminatory abortion coverage bans such as the Hyde Amendment have blocked insurance coverage for abortion care for those who receive their health insurance through the federal government.

Abortion coverage bans disproportionately hurt people already harmed by disparities in our healthcare systems, especially Black and Brown women, transgender and non-binary people, and those with lower incomes. Many states echo the federal abortion coverage bans in their state law. Other states, however, guarantee comprehensive coverage that includes abortion in publicly-funded healthcare programs.

STATE MEASURES RESTRICTING REPRODUCTIVE FREEDOM:

33 STATES and the DISTRICT OF COLUMBIA ban Medicaid coverage of abortion care in almost all cases (exceptions only for life endangerment, rape, and incest): AL, AZ, AR, CO, DE, DC, FL, GA, ID, IN, IA, KS, KY, LA, MI, MS, MO, NE, NV, NH, NC, ND, OH, OK, PA, RI, SC, TN, TX, UT, VA, WV, WI, WY.

- 7 OF THESE STATES cover abortion in their Medicaid programs in extremely limited circumstances beyond life endangerment, rape, and incest: IN, IA, MS, UT, VA, WV, WI.
- 1 STATE bans Medicaid coverage of abortion care without exception, in violation of federal law: SD.

17 STATES expressly prohibit abortion coverage for public employees: AZ, AR, CO, GA, KS, KY, MA, MS, NE, NC, ND, OH, PA, RI, SC, VA, WI.

STATE MEASURES EXPANDING REPRODUCTIVE FREEDOM:

9 STATES cover abortion in their Medicaid programs in circumstances beyond life endangerment, rape, and incest: AK, MD, MA, MN, MT, NJ, NM, NY, VT.

7 STATES impose no restrictions on Medicaid coverage of abortion care: CA, CT, HI, IL, ME, OR, WA.
State Profiles
How Each State Measures Up
**Alabama**

**PRE-ROE BAN:** Alabama has a pre-Roe ban which could impact abortion if *Roe v. Wade* is overturned.

**ACCESS FACT:** 59% of Alabama women live in counties with no abortion clinic.*

### Political Information

<table>
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<th>EXECUTIVE</th>
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| Governor Kay Ivey (R) opposes reproductive freedom. | The Alabama Senate opposes reproductive freedom.  
The Alabama House opposes reproductive freedom. |

### Abortion Rights: Protections and Bans

**PROTECTIONS**

- NO - The Alabama state constitution does not provide additional protection for the right to abortion.
- NO - Alabama does not have an affirmative right to abortion enshrined in state law.

**BANS**

- YES - Alabama bans the standard method for providing second trimester abortion care.
- YES - Alabama unconstitutionally bans abortion throughout pregnancy in violation of *Roe v. Wade*.
- NO - Alabama does not ban abortion based on the reason a pregnant person may seek abortion care.

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**

- NO - Alabama does not allow some qualified healthcare professionals to provide abortion services.

**CLINIC SHUTDOWN LAWS**

- YES - Alabama subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**

- YES - Alabama subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**

- YES - Alabama restricts young people’s access to abortion services by mandating parental consent.

**EMERGENCY CONTRACEPTION**

- NO - Alabama has not improved people’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**

- NO - Alabama law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**

- NO - Alabama does not guarantee that birth control prescriptions will be filled.

**Healthcare Refusals**

- YES - Alabama allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**

- YES - Alabama prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**

- NO - Alabama law does not guarantee expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**

- NO - Alabama expressly prohibits abortion coverage in all or some of the private insurance market.

**PRIVATE COVERAGE OF ABORTION**

- NO - Alabama expressly prohibits abortion coverage in all or some of the private insurance market.

**PUBLIC COVERAGE OF ABORTION**

- NO - Alabama restricts low-income people’s access to abortion.

### COLOR KEY:

- ● Restricts Reproductive Freedom  
- ○ Shows Mixed Support for Reproductive Freedom  
- ● Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

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*Source: Guttmacher Institute, 2017 data*
**Alaska**

**ACCESS FACT:** 32% of Alaska women live in counties with no abortion clinic.

### Political Information

**EXECUTIVE**
Governor Mike Dunleavy (R) opposes reproductive freedom.

**LEGISLATURE**
The Alaska Senate opposes reproductive freedom.
The Alaska House opposes reproductive freedom.

### Abortion Rights: Protections and Bans

<table>
<thead>
<tr>
<th>PROTECTIONS</th>
<th>BANS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YES</strong> - The Alaska state constitution provides protection for the right to abortion in addition to the U.S. Constitution.</td>
<td><strong>NO</strong> - Alaska does not ban the standard method for providing second trimester abortion care.</td>
</tr>
<tr>
<td><strong>NO</strong> - Alaska does not have an affirmative right to abortion enshrined in state law.</td>
<td><strong>NO</strong> - Alaska does not unconstitutionally ban abortion throughout pregnancy in violation of <em>Roe v. Wade</em>.</td>
</tr>
<tr>
<td><strong>NO</strong> - Alaska does not ban abortion based on the reason a pregnant person may seek abortion care.</td>
<td></td>
</tr>
</tbody>
</table>

### Reproductive Health: Access and Restrictions

#### EXPANDED SCOPE OF PRACTICE
**NO** - Alaska does not allow some qualified healthcare professionals to provide abortion services.

#### CLINIC SHUTDOWN LAWS
**YES** - Alaska subjects abortion providers to restrictions not applied to other medical professionals.

#### BIASED COUNSELING AND MANDATORY DELAYS
**YES** - Alaska subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

#### YOUNG PEOPLE AND ABORTION
**YES** - Alaska restricts young people’s access to abortion services by mandating parental notice.

#### EMERGENCY CONTRACEPTION
**NO** - Alaska has not improved people’s access to emergency contraception in the ER.

#### CLINIC PROTECTIONS
**NO** - Alaska law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

#### GUARANTEES AND REFUSALS OF MEDICAL CARE

- **Prescription Guarantees**
  **NO** - Alaska does not guarantee that birth control prescriptions will be filled.

- **Healthcare Refusals**
  **YES** - Alaska allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

- **COUNSELING AND REFERRAL BANS**
  **NO** - Alaska does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

### Reproductive Health Coverage: Guarantees and Restrictions

#### PRIVATE COVERAGE OF CONTRACEPTION
**NO** - Alaska law does not guarantee expanded coverage for contraceptive products.

#### PUBLIC COVERAGE OF CONTRACEPTION
**NO** - Alaska has not expanded coverage for Medicaid-funded family-planning services.

#### PRIVATE COVERAGE OF ABORTION
Alaska has no provision guaranteeing or restricting insurance coverage of abortion.

#### PUBLIC COVERAGE OF ABORTION
**YES** - Alaska covers low-income people’s access to medically necessary abortion care.

**COLOR KEY:** ⚪️ Restricts Reproductive Freedom | ⬤ Shows Mixed Support for Reproductive Freedom | ⚫ Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

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*SOURCE: Guttmacher Institute, 2017 data*
**Arizona**

**PRE-ROE BAN:** Arizona has a pre-Roe ban which could impact abortion if *Roe v. Wade* is overturned.

**ACCESS FACT:** 18% of Arizona women live in counties with no abortion clinic.*

---

### Political Information

| EXECUTIVE | The Arizona Senate opposes reproductive freedom.  
Governor Doug Ducey (R) opposes reproductive freedom.  
The Arizona House opposes reproductive freedom. |
|---|---|

### Abortion Rights: Protections and Bans

#### PROTECTIONS

- **NO** - The Arizona state constitution does not provide additional protection for the right to abortion.
- **NO** - Arizona does not have an affirmative right to abortion enshrined in state law.

#### BANS

- **NO** - Arizona does not ban the standard method for providing second trimester abortion care.
- **YES** - Arizona unconstitutionally bans abortion throughout pregnancy in violation of *Roe v. Wade*.
- **YES** - Arizona bans abortion based on the reason a pregnant person may seek abortion care.

### Reproductive Health: Access and Restrictions

#### EXPANDED SCOPE OF PRACTICE

- **NO** - Arizona does not allow some qualified healthcare professionals to provide abortion services.

#### CLINIC SHUTDOWN LAWS

- **YES** - Arizona subjects abortion providers to restrictions not applied to other medical professionals.

#### BIASED COUNSELING AND MANDATORY DELAYS

- **YES** - Arizona subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

#### YOUNG PEOPLE AND ABORTION

- **YES** - Arizona restricts young people’s access to abortion services by mandating parental consent.

#### EMERGENCY CONTRACEPTION

- **NO** - Arizona has not improved people’s access to emergency contraception in the ER.

#### CLINIC PROTECTIONS

- **NO** - Arizona law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

#### GUARANTEES AND REFUSALS OF MEDICAL CARE

##### Prescription Guarantees

- **NO** - Arizona does not guarantee that birth control prescriptions will be filled.

##### Healthcare Refusals

- **YES** - Arizona allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

##### COUNSELING AND REFERRAL BANS

- **YES** - Arizona prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

### Reproductive Health Coverage: Guarantees and Restrictions

#### PRIVATE COVERAGE OF CONTRACEPTION

- **YES** - Arizona law guarantees expanded coverage for contraceptive products.

#### PUBLIC COVERAGE OF CONTRACEPTION

- **NO** - Arizona has not expanded coverage for Medicaid-funded family-planning services.

#### PRIVATE COVERAGE OF ABORTION

- **NO** - Arizona expressly prohibits abortion coverage in all or some of the private insurance market.

#### PUBLIC COVERAGE OF ABORTION

- **NO** - Arizona restricts low-income people’s access to abortion.

---

**COLOR KEY:**
- "●" Restricts Reproductive Freedom  
- "○" Shows Mixed Support for Reproductive Freedom  
- "◆" Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

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*SOURCE: Guttmacher Institute, 2017 data*
Arkansas

TRIGGER BAN: Arkansas has a trigger law to ban abortion if Roe v. Wade is overturned.

ACCESS FACT: 77% of Arkansas women live in counties with no abortion clinic.*

Political Information

EXECUTIVE
Governor Asa Hutchinson (R) opposes reproductive freedom.

LEGISLATURE
The Arkansas Senate opposes reproductive freedom.
The Arkansas House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS
NO - The Arkansas state constitution does not provide additional protection for the right to abortion.
NO - Arkansas does not have an affirmative right to abortion enshrined in state law.

BANS
YES - Arkansas bans the standard method for providing second trimester abortion care.
YES - Arkansas unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.
YES - Arkansas bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE
NO - Arkansas does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS
YES - Arkansas subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS
YES - Arkansas subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION
YES - Arkansas restricts young people’s access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION
YES - Arkansas law improves people's access to emergency contraception in the ER.

CLINIC PROTECTIONS
NO - Arkansas law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE
Prescription Guarantees
NO - Arkansas does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals
YES - Arkansas allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS
YES - Arkansas prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION
YES - Arkansas law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION
NO - Arkansas has not expanded coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION
NO - Arkansas expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION
NO - Arkansas restricts low-income people’s access to abortion.

COLOR KEY: ○ Restricts Reproductive Freedom | ■ Shows Mixed Support for Reproductive Freedom | ● Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

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*SOURCE: Guttmacher Institute, 2017 data
## Political Information

**EXECUTIVE**
Governor Gavin Newsom (D) supports reproductive freedom.

**LEGISLATURE**
The California Senate supports reproductive freedom.
The California House supports reproductive freedom.

## Abortion Rights: Protections and Bans

**PROTECTIONS**
- YES - The California state constitution provides protection for the right to abortion in addition to the U.S. Constitution.
- YES - California has an affirmative right to abortion enshrined in state law.

**BANS**
- NO - California does not ban the standard method for providing second trimester abortion care.
- NO - California does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
- NO - California does not ban abortion based on the reason a pregnant person may seek abortion care.

## Reproductive Health: Access and Restrictions

### EXPANDED SCOPE OF PRACTICE
- YES - California expands the type of qualified healthcare professionals who can provide abortion services.

### CLINIC SHUTDOWN LAWS
- NO - California treats abortion providers like other medical professionals.

### BIASED COUNSELING AND MANDATORY DELAYS
- NO - California does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

### YOUNG PEOPLE AND ABORTION
- YES - California restricts young people’s access to abortion services by mandating parental consent.

### EMERGENCY CONTRACEPTION
- YES - California law improves people’s access to emergency contraception in the ER.

### CLINIC PROTECTIONS
- YES - California law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

### GUARANTEES AND REFUSALS OF MEDICAL CARE
**Prescription Guarantees**
- YES - California guarantees that birth control prescriptions will be filled.

**Healthcare Refusals**
- YES - California allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

### COUNSELING AND REFERRAL BANS
- NO - California does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

## Reproductive Health Coverage: Guarantees and Restrictions

### PRIVATE COVERAGE OF CONTRACEPTION
- YES - California law guarantees expanded coverage for contraceptive products.

### PUBLIC COVERAGE OF CONTRACEPTION
- YES - California provides increased coverage for Medicaid-funded family-planning services.

### PRIVATE COVERAGE OF ABORTION
- YES - California guarantees abortion coverage in the private insurance market.

### PUBLIC COVERAGE OF ABORTION
- YES - California covers low-income people’s access to abortion without restrictions.

## Color Key
- ![Restricts Reproductive Freedom](/image)
- ![Shows Mixed Support for Reproductive Freedom](/image)
- ![Expands Reproductive Freedom](/image)

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**NARAL Pro-Choice California**
www.prochoicecalifornia.org  🔄 @ProChoiceCA

*SOURCE: Guttmacher Institute, 2017 data*
Colorado

ACCESS FACT: 27% of Colorado women live in counties with no abortion clinic.*

Political Information

EXECUTIVE
Governor Jared Polis (D) supports reproductive freedom.

LEGISLATURE
The Colorado Senate supports reproductive freedom.
The Colorado House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS
NO - The Colorado state constitution does not provide additional protection for the right to abortion.
NO - Colorado does not have an affirmative right to abortion enshrined in state law.

BANS
NO - Colorado does not ban the standard method for providing second trimester abortion care.
NO - Colorado does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
NO - Colorado does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE
Colorado has no measure defining which medical professionals may provide abortion.

CLINIC SHUTDOWN LAWS
NO - Colorado treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS
NO - Colorado does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION
YES - Colorado restricts young people’s access to abortion services by mandating parental notice.

EMERGENCY CONTRACEPTION
YES - Colorado law improves people’s access to emergency contraception in the ER.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION
YES - Colorado law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION
YES - Colorado provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION
Colorado has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION
NO - Colorado restricts low-income people’s access to abortion.

COLOR KEY: ⚫️ Restricts Reproductive Freedom | 🌿 Shows Mixed Support for Reproductive Freedom | ☑️ Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

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*SOURCE: Guttmacher Institute, 2017 data
Connecticut

ACCESS FACT: 5% of Connecticut women live in counties with no abortion clinic.*

**Political Information**

**EXECUTIVE**
Governor Ned Lamont (D) supports reproductive freedom.

**LEGISLATURE**
The Connecticut Senate supports reproductive freedom.
The Connecticut House supports reproductive freedom.

**Abortion Rights: Protections and Bans**

**PROTECTIONS**
- **NO** - The Connecticut state constitution does not provide additional protection for the right to abortion.
- **YES** - Connecticut has an affirmative right to abortion enshrined in state law.

**BANS**
- **NO** - Connecticut does not ban the standard method for providing second trimester abortion care.
- **NO** - Connecticut does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
- **NO** - Connecticut does not ban abortion based on the reason a pregnant person may seek abortion care.

**Reproductive Health: Access and Restrictions**

**EXPANDED SCOPE OF PRACTICE**
- **YES** - Connecticut expands the type of qualified healthcare professionals who can provide abortion services.

**CLINIC SHUTDOWN LAWS**
- **YES** - Connecticut subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
- **NO** - Connecticut does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
- **NO** - Connecticut does not restrict young people's access to abortion services by mandating parental notice or consent.

**EMERGENCY CONTRACEPTION**
- **YES** - Connecticut law improves people's access to emergency contraception in the ER.

**CLINIC PROTECTIONS**
- **YES** - Connecticut law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**
- **NO** - Connecticut does not guarantee that birth control prescriptions will be filled.

**Healthcare Refusals**
- **YES** - Connecticut allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**
- **NO** - Connecticut does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

**Reproductive Health Coverage: Guarantees and Restrictions**

**PRIVATE COVERAGE OF CONTRACEPTION**
- **YES** - Connecticut law guarantees expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- **YES** - Connecticut provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
Connecticut has no provision guaranteeing or restricting insurance coverage of abortion.

**PUBLIC COVERAGE OF ABORTION**
- **YES** - Connecticut covers low-income people's access to abortion without restrictions.

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**COLOR KEY:**
- ⚪ Restricts Reproductive Freedom  |  🌟 Shows Mixed Support for Reproductive Freedom  |  🌟 Expands Reproductive Freedom

NARAL Pro-Choice Connecticut
www.prochoicect.org  🍀 @ProChoiceCT

*SOURCE: Guttmacher Institute, 2017 data*
**Delaware**

**ACCESS FACT:** 18% of Delaware women live in counties with no abortion clinic.*

### Political Information

**EXECUTIVE**
Governor John Carney (D) supports reproductive freedom.

**LEGISLATURE**
The Delaware Senate supports reproductive freedom.
The Delaware House supports reproductive freedom.

### Abortion Rights: Protections and Bans

**PROTECTIONS**
- **NO** - The Delaware state constitution does not provide additional protection for the right to abortion.
- **YES** - Delaware has an affirmative right to abortion enshrined in state law.

**BANS**
- **NO** - Delaware does not ban the standard method for providing second trimester abortion care.
- **NO** - Delaware does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
- **NO** - Delaware does not ban abortion based on the reason a pregnant person may seek abortion care.

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**
- **NO** - Delaware does not allow some qualified healthcare professionals to provide abortion services.

**CLINIC SHUTDOWN LAWS**
- **YES** - Delaware does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

**BIASED COUNSELING AND MANDATORY DELAYS**
- **NO** - Delaware does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting period.

**YOUNG PEOPLE AND ABORTION**
- **YES** - Delaware restricts young people’s access to abortion services by mandating parental notice.

**EMERGENCY CONTRACEPTION**
- **NO** - Delaware has not improved people’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**
- **NO** - Delaware law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**
- **NO** - Delaware does not guarantee that birth control prescriptions will be filled.

**Healthcare Refusals**
- **YES** - Delaware allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**
- **YES** - Delaware prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**
- **YES** - Delaware law guarantees expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- **YES** - Delaware provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
Delaware has no provision guaranteeing or restricting insurance coverage of abortion.

**PUBLIC COVERAGE OF ABORTION**
- **NO** - Delaware restricts low-income people’s access to abortion.

### Color Key:
- 🔴 Restricts Reproductive Freedom
- 🌈 Shows Mixed Support for Reproductive Freedom
- 🌈 Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

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*SOURCE: Guttmacher Institute, 2017 data*
# District of Columbia

**ACCESS FACT:** 0% of District of Columbia women live in counties with no abortion clinic.*

## Political Information

<table>
<thead>
<tr>
<th>EXECUTIVE</th>
<th>LEGISLATURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mayor Muriel Bowser (D) supports reproductive freedom.</td>
<td>The District of Columbia City Council supports reproductive freedom.</td>
</tr>
</tbody>
</table>

## Abortion Rights: Protections and Bans

### PROTECTIONS

- **YES** - The District of Columbia has an affirmative right to abortion enshrined in state law.

### BANS

- **NO** - The District of Columbia does not ban the standard method for providing second trimester abortion care.
- **NO** - The District of Columbia does not unconstitutionally ban abortion throughout pregnancy in violation of *Roe v. Wade*.
- **NO** - The District of Columbia does not ban abortion based on the reason a pregnant person may seek abortion care.

## Reproductive Health: Access and Restrictions

### EXPANDED SCOPE OF PRACTICE

- **NO** - The District of Columbia does not allow some qualified healthcare professionals to provide abortion service.

### CLINIC SHUTDOWN LAWS

- **NO** - The District of Columbia treats abortion providers like other medical professionals.

### BIASED COUNSELING AND MANDATORY DELAYS

- **NO** - The District of Columbia does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

### YOUNG PEOPLE AND ABORTION

- **NO** - The District of Columbia does not restrict young people’s access to abortion services by mandating parental notice or consent.

### EMERGENCY CONTRACEPTION

- **YES** - District of Columbia law improves people’s access to emergency contraception in the ER.

### CLINIC PROTECTIONS

- **YES** - The District of Columbia law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

### GUARANTEES AND REFUSALS OF MEDICAL CARE

#### Prescription Guarantees

- **NO** - The District of Columbia does not guarantee that birth control prescriptions will be filled.

#### Healthcare Refusals

- **YES** - The District of Columbia allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

### COUNSELING AND REFERRAL BANS

- **NO** - The District of Columbia does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

## Reproductive Health Coverage: Guarantees and Restrictions

### PRIVATE COVERAGE OF CONTRACEPTION

- **YES** - The District of Columbia law guarantees expanded coverage for contraceptive products.

### PUBLIC COVERAGE OF CONTRACEPTION

- **YES** - The District of Columbia has expanded coverage for some Medicaid-funded family-planning services.

### PRIVATE COVERAGE OF ABORTION

- The District of Columbia has no provision guaranteeing or restricting insurance coverage of abortion.

### PUBLIC COVERAGE OF ABORTION

- **NO** - The District of Columbia restricts low-income people’s access to abortion.

## COLOR KEY:

- 🌐 Restricts Reproductive Freedom
- 🌍 Shows Mixed Support for Reproductive Freedom
- 🌍 Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

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

*SOURCE: Guttmacher Institute, 2017 data*

**To get involved, please visit:** www.naral.org

[@NARAL](https://twitter.com/NARAL)
**Florida**

**ACCESS FACT:** 24% of Florida women live in counties with no abortion clinic.*

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### Political Information

**EXECUTIVE**  
Governor Ron DeSantis (R) opposes reproductive freedom.

**LEGISLATURE**  
The Florida Senate opposes reproductive freedom.  
The Florida House opposes reproductive freedom.

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### Abortion Rights: Protections and Bans

**PROTECTIONS**  
- **YES** - The Florida state constitution provides protection for the right to abortion in addition to the U.S. Constitution.  
- **NO** - Florida does not have an affirmative right to abortion enshrined in state law.

**BANS**  
- **NO** - Florida does not ban the standard method for providing second trimester abortion care.  
- **NO** - Florida does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.  
- **NO** - Florida does not ban abortion based on the reason a pregnant person may seek abortion care.

---

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**  
- **NO** - Florida does not allow some qualified healthcare professionals to provide abortion services.

**CLINIC SHUTDOWN LAWS**  
- **YES** - Florida subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**  
- **YES** - Florida subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**  
- **YES** - Florida restricts young people’s access to abortion services by mandating parental notice and consent.

**EMERGENCY CONTRACEPTION**  
- **NO** - Florida has not improved people’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**  
- **NO** - Florida law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**  
**Prescription Guarantees**  
- **NO** - Florida does not guarantee that birth control prescriptions will be filled.

**Healthcare Refusals**  
- **YES** - Florida allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**  
- **NO** - Florida does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

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### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**  
- **NO** - Florida law does not guarantee expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**  
- **YES** - Florida provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**  
- **NO** - Florida expressly prohibits abortion coverage in all or some of the private insurance market.

**PUBLIC COVERAGE OF ABORTION**  
- **NO** - Florida restricts low-income people’s access to abortion.

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*COLOR KEY:*  
- 🟢 Restricts Reproductive Freedom  
- 🟠 Shows Mixed Support for Reproductive Freedom  
- 🟡 Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org  
@NARAL

*SOURCE: Guttmacher Institute, 2017 data*
**Georgia**

**ACCESS FACT:** 55% of Georgia women live in counties with no abortion clinic.*

### Political Information

**EXECUTIVE**
Governor Brian Kemp (R) opposes reproductive freedom.

**LEGISLATURE**
The Georgia Senate opposes reproductive freedom.
The Georgia House opposes reproductive freedom.

### Abortion Rights: Protections and Bans

**PROTECTIONS**
- NO - The Georgia state constitution does not provide additional protection for the right to abortion.
- NO - Georgia does not have an affirmative right to abortion enshrined in state law.

**BANS**
- NO - Georgia does not ban the standard method for providing second trimester abortion care.
- YES - Georgia unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.
- NO - Georgia does not ban abortion based on the reason a pregnant person may seek abortion care.

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**
- NO - Georgia does not allow some qualified healthcare professionals to provide abortion services.

**CLINIC SHUTDOWN LAWS**
- YES - Georgia subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
- YES - Georgia subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
- YES - Georgia restricts young people’s access to abortion services by mandating parental notice.

**EMERGENCY CONTRACEPTION**
- NO - Georgia has not improved people’s access to emergency contraception in the ER.

### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**
- YES - Georgia law guarantees expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- YES - Georgia provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
- NO - Georgia expressly prohibits abortion coverage in all or some of the private insurance market.

**PUBLIC COVERAGE OF ABORTION**
- NO - Georgia restricts low-income people’s access to abortion.

### COLOR KEY:
- **●** Restricts Reproductive Freedom  |  **○** Shows Mixed Support for Reproductive Freedom  |  **●** Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

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*SOURCE: Guttmacher Institute, 2017 data*
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*SOURCE: Guttmacher Institute, 2017 data
### Political Information

**EXECUTIVE**  
Governor Brad Little (R) opposes reproductive freedom.

**LEGISLATURE**  
The Idaho Senate opposes reproductive freedom.  
The Idaho House opposes reproductive freedom.

### Abortion Rights: Protections and Bans

<table>
<thead>
<tr>
<th>PROTECTIONS</th>
<th>BANS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NO</strong> - The Idaho state constitution does not provide additional protection for the right to abortion.</td>
<td><strong>NO</strong> - Idaho does not ban the standard method for providing second trimester abortion care.</td>
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<tr>
<td><strong>NO</strong> - Idaho does not have an affirmative right to abortion enshrined in state law.</td>
<td><strong>YES</strong> - Idaho unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.</td>
</tr>
<tr>
<td><strong>NO</strong> - Idaho does not ban abortion based on the reason a pregnant person may seek abortion care.</td>
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### Reproductive Health: Access and Restrictions

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<tr>
<td><strong>NO</strong> - Idaho does not allow some qualified healthcare professionals to provide abortion services.</td>
<td><strong>NO</strong> - Idaho law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.</td>
</tr>
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<td><strong>YES</strong> - Idaho subjects abortion providers to restrictions not applied to other medical professionals.</td>
<td><strong>Prescription Guarantees</strong></td>
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<td><strong>YES</strong> - Idaho subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.</td>
<td><strong>NO</strong> - Idaho does not guarantee that birth control prescriptions will be filled.</td>
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<td><strong>YOUNG PEOPLE AND ABORTION</strong></td>
<td><strong>Healthcare Refusals</strong></td>
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<td><strong>YES</strong> - Idaho restricts young people’s access to abortion services by mandating parental consent.</td>
<td><strong>YES</strong> - Idaho allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.</td>
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<td><strong>EMERGENCY CONTRACEPTION</strong></td>
<td><strong>COUNSELING AND REFERRAL BANS</strong></td>
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<td><strong>NO</strong> - Idaho has not improved people’s access to emergency contraception in the ER.</td>
<td><strong>NO</strong> - Idaho does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.</td>
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### Reproductive Health Coverage: Guarantees and Restrictions

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<td><strong>NO</strong> - Idaho law does not guarantee expanded coverage for contraceptive products.</td>
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<tr>
<td><strong>PUBLIC COVERAGE OF CONTRACEPTION</strong></td>
<td><strong>PUBLIC COVERAGE OF ABORTION</strong></td>
</tr>
<tr>
<td><strong>NO</strong> - Idaho has not expanded coverage for Medicaid-funded family-planning services.</td>
<td><strong>NO</strong> - Idaho restricts low-income people’s access to abortion.</td>
</tr>
</tbody>
</table>

**COLOR KEY:**  
- ● Restricts Reproductive Freedom  
- ○ Shows Mixed Support for Reproductive Freedom  
- ● Expands Reproductive Freedom

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[@NARAL](http://twitter.com/NARAL)

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*SOURCE: Guttmacher Institute, 2017 data*
**Illinois**

ACCESS FACT: 37% of Illinois women live in counties with no abortion clinic.*

### Political Information

**EXECUTIVE**
Governor J.B. Pritzker (D) supports reproductive freedom.

**LEGISLATURE**
The Illinois Senate supports reproductive freedom.
The Illinois House supports reproductive freedom.

### Abortion Rights: Protections and Bans

**PROTECTIONS**
- NO - The Illinois state constitution does not provide additional protection for the right to abortion.
- YES - Illinois has an affirmative right to abortion enshrined in state law.

**BANS**
- NO - Illinois does not ban the standard method for providing second trimester abortion care.
- NO - Illinois does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
- NO - Illinois does not ban abortion based on the reason a pregnant person may seek abortion care.

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**
- YES - Illinois expands the type of qualified healthcare professionals who can provide abortion services.

**CLINIC SHUTDOWN LAWS**
- YES - Illinois subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
- NO - Illinois does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
- YES - Illinois restricts young people’s access to abortion services by mandating parental notice.

**EMERGENCY CONTRACEPTION**
- YES - Illinois law improves people’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**
- NO - Illinois law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

- Prescription Guarantees
  - YES - Illinois guarantees that birth control prescriptions will be filled.

- Healthcare Refusals
  - YES - Illinois allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

- COUNSELING AND REFERRAL BANS
  - YES - Illinois prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**
- YES - Illinois guarantees expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- YES - Illinois has expanded coverage for some Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
- YES - Illinois guarantees abortion coverage in the private insurance market.

**PUBLIC COVERAGE OF ABORTION**
- YES - Illinois covers low-income people’s access to abortion without restrictions.

### Color Key:
- ● Restricts Reproductive Freedom
- ○ Shows Mixed Support for Reproductive Freedom
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*SOURCE: Guttmacher Institute, 2017 data*
### Political Information

**EXECUTIVE**
- Governor Eric Holcomb (R) opposes reproductive freedom.

**LEGISLATURE**
- The Indiana Senate opposes reproductive freedom.
- The Indiana House opposes reproductive freedom.

### Abortion Rights: Protections and Bans

**PROTECTIONS**
- **NO** - The Indiana state constitution does not provide additional protection for the right to abortion.
- **NO** - Indiana does not have an affirmative right to abortion enshrined in state law.

**BANS**
- **YES** - Indiana bans the standard method for providing second trimester abortion care.
- **YES** - Indiana unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.
- **YES** - Indiana bans abortion based on the reason a pregnant person may seek abortion care.

### Reproductive Health: Access and Restrictions

#### EXPANDED SCOPE OF PRACTICE
- **NO** - Indiana does not allow some qualified healthcare professionals to provide abortion services.

#### CLINIC SHUTDOWN LAWS
- **YES** - Indiana subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

#### BIASED COUNSELING AND MANDATORY DELAYS
- **YES** - Indiana subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

#### YOUNG PEOPLE AND ABORTION
- **YES** - Indiana restricts young people’s access to abortion services by mandating parental consent.

#### EMERGENCY CONTRACEPTION
- **NO** - Indiana has not improved people’s access to emergency contraception in the ER.

#### CLINIC PROTECTIONS
- **NO** - Indiana law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

#### GUARANTEES AND REFUSALS OF MEDICAL CARE

- **Prescription Guarantees**
  - **NO** - Indiana does not guarantee that birth control prescriptions will be filled.

- **Healthcare Refusals**
  - **YES** - Indiana allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

- **COUNSELING AND REFERRAL BANS**
  - **YES** - Indiana prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

### Reproductive Health Coverage: Guarantees and Restrictions

#### PRIVATE COVERAGE OF CONTRACEPTION
- **NO** - Indiana law does not guarantee expanded coverage for contraceptive products.

#### PUBLIC COVERAGE OF CONTRACEPTION
- **YES** - Indiana provides increased coverage for Medicaid-funded family-planning services.

#### PRIVATE COVERAGE OF ABORTION
- **NO** - Indiana expressly prohibits abortion coverage in all or some of the private insurance market.

#### PUBLIC COVERAGE OF ABORTION
- **NO** - Indiana restricts low-income people's access to abortion.

COLOR KEY: ● Restricts Reproductive Freedom | ○ Shows Mixed Support for Reproductive Freedom | ● Expands Reproductive Freedom

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*SOURCE: Guttmacher Institute, 2017 data*
## Iowa

### Political Information

**EXECUTIVE**
Governor Kim Reynolds (R) opposes reproductive freedom.

**LEGISLATURE**
The Iowa Senate opposes reproductive freedom.  
The Iowa House opposes reproductive freedom.

### Abortion Rights: Protections and Bans

<table>
<thead>
<tr>
<th>PROTECTIONS</th>
<th>BANS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YES</strong> - The Iowa state constitution provides protection for the right to abortion in addition to the U.S. Constitution.</td>
<td><strong>NO</strong> - Iowa does not ban the standard method for providing second trimester abortion care.</td>
</tr>
<tr>
<td><strong>NO</strong> - Iowa does not have an affirmative right to abortion enshrined in state law.</td>
<td><strong>YES</strong> - Iowa unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.</td>
</tr>
<tr>
<td><strong>NO</strong> - Iowa does not ban abortion based on the reason a pregnant person may seek abortion care.</td>
<td><strong>NO</strong> - Iowa does not ban abortion based on the reason a pregnant person may seek abortion care.</td>
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### Reproductive Health: Access and Restrictions

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<tr>
<th>EXPANDED SCOPE OF PRACTICE</th>
<th>CLINIC PROTECTIONS</th>
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<tbody>
<tr>
<td><strong>NO</strong> - Iowa does not allow some qualified healthcare professionals to provide abortion services.</td>
<td><strong>NO</strong> - Iowa law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.</td>
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<tr>
<th>CLINIC SHUTDOWN LAWS</th>
<th>GUARANTEES AND REFUSALS OF MEDICAL CARE</th>
</tr>
</thead>
</table>
| **YES** - Iowa subjects abortion providers to restrictions not applied to other medical professionals. | **Prescription Guarantees**
| **YES** - Iowa subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods. | **NO** - Iowa does not guarantee that birth control prescriptions will be filled. |

<table>
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<tr>
<th>BIAISED COUNSELING AND MANDATORY DELAYS</th>
<th>Healthcare Refusals</th>
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<tr>
<td><strong>YES</strong> - Iowa subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.</td>
<td><strong>YES</strong> - Iowa allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.</td>
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<tr>
<th>YOUNG PEOPLE AND ABORTION</th>
<th>COUNSELING AND REFERRAL BANS</th>
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</thead>
<tbody>
<tr>
<td><strong>YES</strong> - Iowa restricts young people's access to abortion services by mandating parental notice.</td>
<td><strong>NO</strong> - Iowa does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.</td>
</tr>
</tbody>
</table>

| EMERGENCY CONTRACEPTION | |
|--------------------------||
| **NO** - Iowa has not improved people's access to emergency contraception in the ER. | |

### Reproductive Health Coverage: Guarantees and Restrictions

<table>
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<tr>
<th>PRIVATE COVERAGE OF CONTRACEPTION</th>
<th>PRIVATE COVERAGE OF ABORTION</th>
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</thead>
<tbody>
<tr>
<td><strong>YES</strong> - Iowa guarantees expanded coverage for contraceptive products.</td>
<td>Iowa has no provision guaranteeing or restricting insurance coverage of abortion.</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>PUBLIC COVERAGE OF CONTRACEPTION</th>
<th>PUBLIC COVERAGE OF ABORTION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NO</strong> - Iowa has not expanded coverage for some Medicaid-funded family-planning services.</td>
<td><strong>NO</strong> - Iowa restricts low-income people's access to abortion.</td>
</tr>
</tbody>
</table>

**COLOR KEY:**
- ![Restricts Reproductive Freedom](https://example.com/icon1)
- ![Shows Mixed Support for Reproductive Freedom](https://example.com/icon2)
- ![Expands Reproductive Freedom](https://example.com/icon3)

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**NARAL Pro-Choice Iowa**
www.prochoiceiowa.org  @NARALIowa

---

*SOURCE: Guttmacher Institute, 2017 data*
Political Information

**EXECUTIVE**
Governor Laura Kelly (D) supports reproductive freedom.

**LEGISLATURE**
The Kansas Senate opposes reproductive freedom.
The Kansas House opposes reproductive freedom.

### Abortion Rights: Protections and Bans

**PROTECTIONS**
- **YES** - The Kansas state constitution provides protection for the right to abortion in addition to the U.S. Constitution.
- **NO** - Kansas does not have an affirmative right to abortion enshrined in state law.

**BANS**
- **YES** - Kansas bans the standard method for providing second trimester abortion care.
- **YES** - Kansas unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.
- **YES** - Kansas bans abortion based on the reason a pregnant person may seek abortion care.

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**
- **NO** - Kansas does not allow some qualified healthcare professionals to provide abortion services.

**CLINIC SHUTDOWN LAWS**
- **YES** - Kansas subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
- **YES** - Kansas subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
- **YES** - Kansas restricts young people's access to abortion services by mandating parental consent.

**EMERGENCY CONTRACEPTION**
- **NO** - Kansas has not improved people's access to emergency contraception in the ER.

**CLINIC PROTECTIONS**
- **YES** - Kansas law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**
- **Prescription Guarantees**
  - **NO** - Kansas does not guarantee that birth control prescriptions will be filled.

- **Healthcare Refusals**
  - **YES** - Kansas allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

- **COUNSELING AND REFERRAL BANS**
  - **YES** - Kansas prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**
- **NO** - Kansas law does not guarantee expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- **NO** - Kansas has not expanded coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
- **NO** - Kansas expressly prohibits abortion coverage in all or some of the private insurance market.

**PUBLIC COVERAGE OF ABORTION**
- **NO** - Kansas restricts low-income people's access to abortion.

---

**COLOR KEY:**
- ◼️ Restricts Reproductive Freedom | ◼️ Shows Mixed Support for Reproductive Freedom | ◼️ Expands Reproductive Freedom

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*SOURCE: Guttmacher Institute, 2017 data*
## Kentucky

**TRIGGER BAN:** Kentucky has a trigger law to ban abortion if Roe v. Wade is overturned.

**ACCESS FACT:** 82% of Kentucky women live in counties with no abortion clinic.*

## Political Information

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<thead>
<tr>
<th>EXECUTIVE</th>
<th>LEGISLATURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governor Andy Beshear (D) supports reproductive freedom.</td>
<td>The Kentucky Senate opposes reproductive freedom. The Kentucky House opposes reproductive freedom.</td>
</tr>
</tbody>
</table>

## Abortion Rights: Protections and Bans

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<td><strong>NO</strong> - The Kentucky state constitution does not provide additional protection for the right to abortion.</td>
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## Reproductive Health Coverage: Guarantees and Restrictions

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<td><strong>NO</strong> - Kentucky restricts low-income people’s access to abortion.</td>
</tr>
</tbody>
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## COLOR KEY:
- ● Restricts Reproductive Freedom
- ● Shows Mixed Support for Reproductive Freedom
- ● Expands Reproductive Freedom

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*SOURCE: Guttmacher Institute, 2017 data*
Louisiana

TRIGGER BAN: Louisiana has a trigger law to ban abortion if Roe v. Wade is overturned.

ACCESS FACT: 72% of Louisiana women live in counties with no abortion clinic.*

**Political Information**

**EXECUTIVE**  
Governor John Bel Edwards (D) opposes reproductive freedom.

**LEGISLATURE**  
The Louisiana Senate opposes reproductive freedom.  
The Louisiana House opposes reproductive freedom.

**Abortion Rights: Protections and Bans**

**PROTECTIONS**  
NO - The Louisiana state constitution does not provide additional protection for the right to abortion.  
NO - Louisiana does not have an affirmative right to abortion enshrined in state law.

**BANS**  
YES - Louisiana bans the standard method for providing second trimester abortion care.  
YES - Louisiana unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.  
YES - Louisiana bans abortion based on the reason a pregnant person may seek abortion care.

**Reproductive Health: Access and Restrictions**

**EXPANDED SCOPE OF PRACTICE**  
NO - Louisiana does not allow some qualified healthcare professionals to provide abortion services.

**CLINIC SHUTDOWN LAWS**  
YES - Louisiana subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**  
YES - Louisiana subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**  
YES - Louisiana restricts young people's access to abortion services by mandating parental consent.

**EMERGENCY CONTRACEPTION**  
NO - Louisiana has not improved people's access to emergency contraception in the ER.

**CLINIC PROTECTIONS**  
NO - Louisiana law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**  
NO - Louisiana does not guarantee that birth control prescriptions will be filled.

**Healthcare Refusals**  
YES - Louisiana allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**  
YES - Louisiana prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

**Reproductive Health Coverage: Guarantees and Restrictions**

**PRIVATE COVERAGE OF CONTRACEPTION**  
NO - Louisiana law does not guarantee expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**  
YES - Louisiana provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**  
NO - Louisiana expressly prohibits abortion coverage in all or some of the private insurance market.

**PUBLIC COVERAGE OF ABORTION**  
NO - Louisiana restricts low-income people's access to abortion.

**COLOR KEY:**  
- ○ Restricts Reproductive Freedom  
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*SOURCE: Guttmacher Institute, 2017 data*
**Political Information**

**EXECUTIVE**
Governor Janet Mills (D) supports reproductive freedom.

**LEGISLATURE**
The Maine Senate supports reproductive freedom.
The Maine House supports reproductive freedom.

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**Abortion Rights: Protections and Bans**

**PROTECTIONS**
- **NO** - The Maine state constitution does not provide additional protection for the right to abortion.
- **YES** - Maine has an affirmative right to abortion enshrined in state law.

**BANS**
- **NO** - Maine does not ban the standard method for providing second trimester abortion care.
- **NO** - Maine does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
- **NO** - Maine does not ban abortion based on the reason a pregnant person may seek abortion care.

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**Reproductive Health: Access and Restrictions**

**EXPANDED SCOPE OF PRACTICE**
- **YES** - Maine expands the type of qualified healthcare professionals who can provide abortion services.

**CLINIC SHUTDOWN LAWS**
- **NO** - Maine treats abortion providers like other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
- **NO** - Maine does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
- **YES** - Maine allows physicians to bypass the state's parental consent requirements.

**EMERGENCY CONTRACEPTION**
- **NO** - Maine has not improved people's access to emergency contraception in the ER.

**CLINIC PROTECTIONS**
- **YES** - Maine law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**
- **YES** - Maine guarantees that birth control prescriptions will be filled.

**Healthcare Refusals**
- **YES** - Maine allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**
- **NO** - Maine does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

---

**Reproductive Health Coverage: Guarantees and Restrictions**

**PRIVATE COVERAGE OF CONTRACEPTION**
- **YES** - Maine law guarantees expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- **YES** - Maine provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
- **YES** - Maine guarantees abortion coverage in the private insurance market.

**PUBLIC COVERAGE OF ABORTION**
- **YES** - Maine covers low-income people's access to abortion without restrictions.

---

**COLOR KEY: **
- 🔴 Restricts Reproductive Freedom
- 🟢 Shows Mixed Support for Reproductive Freedom
- 🟢 Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

[@NARAL](https://twitter.com/NARAL)

*SOURCE: Guttmacher Institute, 2017 data*
**Political Information**

**EXECUTIVE**
Governor Larry Hogan (R) has a mixed record on reproductive freedom.

**LEGISLATURE**
The Maryland Senate supports reproductive freedom.
The Maryland House supports reproductive freedom.

**Abortion Rights: Protocols and Bans**

**PROTECTIONS**
NO - The Maryland state constitution does not provide additional protection for the right to abortion.
YES - Maryland has an affirmative right to abortion enshrined in state law.

**BANS**
NO - Maryland does not ban the standard method for providing second trimester abortion care.
NO - Maryland does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
NO - Maryland does not ban abortion based on the reason a pregnant person may seek abortion care.

**Reproductive Health: Access and Restrictions**

**EXPANDED SCOPE OF PRACTICE**
YES - Maryland expands the type of qualified healthcare professionals who can provide abortion services.

**CLINIC SHUTDOWN LAWS**
YES - Maryland subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
NO - Maryland does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
YES - Maryland allows physicians to bypass the state’s parental notice requirements.

**EMERGENCY CONTRACEPTION**
YES - Maryland law improves women’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**
YES - Maryland law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**
NO - Maryland does not guarantee that birth control prescriptions will be filled.

**Healthcare Refusals**
YES - Maryland allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**
NO - Maryland does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

**Reproductive Health Coverage: Guarantees and Restrictions**

**PRIVATE COVERAGE OF CONTRACEPTION**
YES - Maryland law guarantees expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
YES - Maryland provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
Maryland has no provision guaranteeing or restricting insurance coverage of abortion.

**PUBLIC COVERAGE OF ABORTION**
YES - Maryland covers low-income people’s access to medically necessary abortion care.

**COLOR KEY:**
- 🍽️ Restricts Reproductive Freedom
- ☟️ Shows Mixed Support for Reproductive Freedom
- 🌈 Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

*NARAL Pro-Choice Maryland
www.prochoicemaryland.org  ➤ @ProChoiceMD

*SOURCE: Guttmacher Institute, 2017 data
**Massachusetts**

**ACCESS FACT:** 13% of Massachusetts women live in counties with no abortion clinic.*

---

### Political Information

**EXECUTIVE**
Governor Charlie Baker* (R) has a **mixed record** on reproductive freedom.

**LEGISLATURE**
The Massachusetts Senate supports reproductive freedom.
The Massachusetts House supports reproductive freedom.

### Abortion Rights: Protections and Bans

**PROTECTIONS**
- **YES** - The Massachusetts state constitution provides protection for the right to abortion in addition to the U.S. Constitution.
- **YES** - Massachusetts has an affirmative right to abortion enshrined in state law.

**BANS**
- **NO** - Massachusetts does not ban the standard method for providing second trimester abortion care.
- **NO** - Massachusetts does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
- **NO** - Massachusetts does not ban abortion based on the reason a pregnant person may seek abortion care.

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**
- **YES** - Massachusetts expands the type of qualified healthcare professionals who can provide abortion services.

**CLINIC SHUTDOWN LAWS**
- **NO** - Massachusetts treats abortion providers like other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
- **NO** - Massachusetts does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
- **YES** - Massachusetts restricts young people’s access to abortion services by mandating parental consent.

**EMERGENCY CONTRACEPTION**
- **YES** - Massachusetts law improves people’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**
- **YES** - Massachusetts law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**
- **NO** - Massachusetts does not guarantee that birth control prescriptions will be filled.

**Healthcare Refusals**
- **YES** - Massachusetts allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**
- **NO** - Massachusetts does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**
- **YES** - Massachusetts law guarantees expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- **YES** - Massachusetts provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
- Massachusetts has no provision guaranteeing or restricting insurance coverage of abortion.

**PUBLIC COVERAGE OF ABORTION**
- **YES** - Massachusetts covers low-income people’s access to medically necessary abortion care.

**COLOR KEY:**  ● Restricts Reproductive Freedom  |  ● Shows Mixed Support for Reproductive Freedom  |  ● Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**NARAL Pro-Choice Massachusetts**
www.prochoicemass.org  ● @prochoicemass

*SOURCE: Guttmacher Institute, 2017 data*
**Michigan**

**PRE-ROE BAN:** Michigan has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned.

**ACCESS FACT:** 35% of Michigan women live in counties with no abortion clinic.

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**Political Information**

**EXECUTIVE**
Governor Gretchen Whitmer (D) supports reproductive freedom.

**LEGISLATURE**
The Michigan Senate opposes reproductive freedom.
The Michigan House opposes reproductive freedom.

---

**Abortion Rights: Protections and Bans**

**PROTECTIONS**
- NO - The Michigan state constitution does not provide additional protection for the right to abortion.
- NO - Michigan does not have an affirmative right to abortion enshrined in state law.

**BANS**
- NO - Michigan does not ban the standard method for providing second trimester abortion care.
- NO - Michigan does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
- NO - Michigan does not ban abortion based on the reason a pregnant person may seek abortion care.

---

**Reproductive Health: Access and Restrictions**

**EXPANDED SCOPE OF PRACTICE**
- **NO** - Michigan does not allow some qualified healthcare professionals to provide abortion services.

**CLINIC SHUTDOWN LAWS**
- **YES** - Michigan subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
- **YES** - Michigan subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
- **YES** - Michigan restricts young people’s access to abortion services by mandating parental consent.

**EMERGENCY CONTRACEPTION**
- **NO** - Michigan has not improved people’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**
- **YES** - Michigan law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**
- **NO** - Michigan does not guarantee that birth control prescriptions will be filled.

**Healthcare Refusals**
- **YES** - Michigan allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**
- **YES** - Michigan prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

---

**Reproductive Health Coverage: Guarantees and Restrictions**

**PRIVATE COVERAGE OF CONTRACEPTION**
- **YES** - Michigan law guarantees expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- **NO** - Michigan has not expanded coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
- **NO** - Michigan expressly prohibits abortion coverage in all or some of the private insurance market.

**PUBLIC COVERAGE OF ABORTION**
- **NO** - Michigan restricts low-income people’s access to abortion.

---

**COLOR KEY:**
- ● Restricts Reproductive Freedom
- ● Shows Mixed Support for Reproductive Freedom
- ● Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

@NARAL

*SOURCE: Guttmacher Institute, 2017 data*
**Political Information**

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<th>LEGISLATURE</th>
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<tbody>
<tr>
<td>Governor Timothy Walz (D) supports reproductive freedom.</td>
<td>The Minnesota Senate opposes reproductive freedom. The Minnesota House supports reproductive freedom.</td>
</tr>
</tbody>
</table>

**Abortion Rights:** Protections and Bans

<table>
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<tr>
<th>PROTECTIONS</th>
<th>BANS</th>
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<tbody>
<tr>
<td><strong>YES</strong> - The Minnesota state constitution provides protection for the right to abortion in addition to the U.S. Constitution.</td>
<td><strong>NO</strong> - Minnesota does not ban the standard method for providing second trimester abortion care.</td>
</tr>
<tr>
<td><strong>NO</strong> - Minnesota does not have an affirmative right to abortion enshrined in state law.</td>
<td><strong>NO</strong> - Minnesota does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.</td>
</tr>
<tr>
<td><strong>NO</strong> - Minnesota does not ban abortion based on the reason a pregnant person may seek abortion care.</td>
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</tr>
</tbody>
</table>

**Reproductive Health:** Access and Restrictions

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<tr>
<th>EXPANDED SCOPE OF PRACTICE</th>
<th>CLINIC PROTECTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NO</strong> - Minnesota does not allow some qualified healthcare professionals to provide abortion services.</td>
<td><strong>YES</strong> - Minnesota law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.</td>
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<tr>
<th>CLINIC SHUTDOWN LAWS</th>
<th>GUARANTEES AND REFUSALS OF MEDICAL CARE</th>
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<tr>
<td><strong>YES</strong> - Minnesota subjects abortion providers to restrictions not applied to other medical professionals.</td>
<td>Prescription Guarantees</td>
</tr>
<tr>
<td><strong>YES</strong> - Minnesota subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.</td>
<td><strong>NO</strong> - Minnesota does not guarantee that birth control prescriptions will be filled.</td>
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</tbody>
</table>

<table>
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<tr>
<th>BIASED COUNSELING AND MANDATORY DELAYS</th>
<th>Healthcare Refusals</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YES</strong> - Minnesota subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.</td>
<td><strong>YES</strong> - Minnesota allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.</td>
</tr>
</tbody>
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<tr>
<th>YOUNG PEOPLE AND ABORTION</th>
<th>COUNSELING AND REFERRAL BANS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YES</strong> - Minnesota restricts young people’s access to abortion services by mandating parental notice.</td>
<td><strong>YES</strong> - Minnesota prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.</td>
</tr>
</tbody>
</table>

**Emergency Contraception**

**YES** - Minnesota law improves people’s access to emergency contraception in the ER.

**Reproductive Health Coverage:** Guarantees and Restrictions

<table>
<thead>
<tr>
<th>PRIVATE COVERAGE OF CONTRACEPTION</th>
<th>PRIVATE COVERAGE OF ABORTION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NO</strong> - Minnesota law does not guarantee expanded coverage for contraceptive products.</td>
<td>Minnesota has no provision guaranteeing or restricting insurance coverage of abortion.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PUBLIC COVERAGE OF CONTRACEPTION</th>
<th>PUBLIC COVERAGE OF ABORTION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YES</strong> - Minnesota provides increased coverage for Medicaid-funded family-planning services.</td>
<td><strong>YES</strong> - Minnesota covers low-income women’s access to abortion through a broad health exception.</td>
</tr>
</tbody>
</table>

**Color Key:**
- ● Restricts Reproductive Freedom
- ○ Shows Mixed Support for Reproductive Freedom
- ○ Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**NARAL Pro-Choice Minnesota**

www.prochoiceminnesota.org  @ProChoiceMN

*SOURCE: Guttmacher Institute, 2017 data*
Mississippi

TRIGGER BAN: Mississippi has a trigger law to ban abortion if Roe v. Wade is overturned.
ACCESS FACT: 91% of Mississippi women live in counties with no abortion clinic.*

Political Information

EXECUTIVE
Governor Tate Reeves (R) opposes reproductive freedom.

LEGISLATURE
The Mississippi Senate opposes reproductive freedom.
The Mississippi House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS
NO - The Mississippi state constitution does not provide additional protection for the right to abortion.
NO - Mississippi does not have an affirmative right to abortion enshrined in state law.

BANS
YES - Mississippi bans the standard method for providing second trimester abortion care.
YES - Mississippi unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.
YES - Mississippi bans abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE
NO - Mississippi does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS
YES - Mississippi subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS
YES - Mississippi subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION
YES - Mississippi restricts young people’s access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION
NO - Mississippi has not improved people’s access to emergency contraception in the ER.

CLINIC PROTECTIONS
NO - Mississippi law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE
Prescription Guarantees
NO - Mississippi does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals
YES - Mississippi allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS
YES - Mississippi prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION
NO - Mississippi law does not guarantee expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION
YES - Mississippi provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION
NO - Mississippi expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION
NO - Mississippi restricts low-income people’s access to abortion.

COLOR KEY: ○ Restricts Reproductive Freedom | ● Shows Mixed Support for Reproductive Freedom | ○ Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

*SOURCE: Guttmacher Institute, 2017 data
## Political Information

### EXECUTIVE
Governor Mike Parson (R) opposes reproductive freedom.

### LEGISLATURE
The Missouri Senate opposes reproductive freedom.
The Missouri House opposes reproductive freedom.

## Abortion Rights: Protections and Bans

### PROTECTIONS
- **NO** - The Missouri state constitution does not provide additional protection for the right to abortion.
- **NO** - Missouri does not have an affirmative right to abortion enshrined in state law.

### BANS
- **NO** - Missouri does not ban the standard method for providing second trimester abortion care.
- **YES** - Missouri unconstitutionally bans abortion throughout pregnancy in violation of *Roe v. Wade*.
- **YES** - Missouri bans abortion based on the reason a pregnant person may seek abortion care.

## Reproductive Health: Access and Restrictions

### EXPANDED SCOPE OF PRACTICE
- **NO** - Missouri does not allow some qualified healthcare professionals to provide abortion services.

### CLINIC SHUTDOWN LAWS
- **YES** - Missouri subjects abortion providers to restrictions not applied to other medical professionals.

### BIASED COUNSELING AND MANDATORY DELAYS
- **YES** - Missouri subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

### YOUNG PEOPLE AND ABORTION
- **YES** - Missouri restricts young people’s access to abortion services by mandating parental consent.

### EMERGENCY CONTRACEPTION
- **NO** - Missouri has not improved people’s access to emergency contraception in the ER.

### CLINIC PROTECTIONS
- **NO** - Missouri law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

### GUARANTEES AND REFUSALS OF MEDICAL CARE

#### Prescription Guarantees
- **NO** - Missouri does not guarantee that birth control prescriptions will be filled.

#### Healthcare Refusals
- **YES** - Missouri allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

### COUNSELING AND REFERRAL BANS
- **YES** - Missouri prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

## Reproductive Health Coverage: Guarantees and Restrictions

### PRIVATE COVERAGE OF CONTRACEPTION
- **NO** - Missouri law does not guarantee expanded coverage for contraceptive products.

### PUBLIC COVERAGE OF CONTRACEPTION
- **NO** - Missouri has not expanded coverage for Medicaid-funded family-planning services.

### PRIVATE COVERAGE OF ABORTION
- **NO** - Missouri expressly prohibits abortion coverage in all or some of the private insurance market.

### PUBLIC COVERAGE OF ABORTION
- **NO** - Missouri restricts low-income people’s access to abortion.

## COLOR KEY
- ● Restricts Reproductive Freedom  |  ● Shows Mixed Support for Reproductive Freedom  |  ● Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**NARAL Pro-Choice Missouri**
[www.prochoicemissouri.org](http://www.prochoicemissouri.org)  🐘@NARALMissouri

*SOURCE: Guttmacher Institute, 2017 data*
Montana

ACCESS FACT: 56% of Montana women live in counties with no abortion clinic.*

Strongly Protected Access

### Political Information

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<tbody>
<tr>
<td>Governor Greg Gianforte (R) opposes reproductive freedom.</td>
<td>The Montana Senate has a mixed record on reproductive freedom. The Montana House has a mixed record on reproductive freedom.</td>
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### Abortion Rights: Protections and Bans

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### Reproductive Health: Access and Restrictions

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<td><strong>YES</strong> - Montana expands the type of qualified healthcare professionals who can provide abortion services.</td>
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<td><strong>GUARANTEES AND REFUSALS OF MEDICAL CARE</strong></td>
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<td><strong>Prescription Guarantees</strong></td>
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<td><strong>COUNSELING AND REFERRAL BANS</strong></td>
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<td><strong>NO</strong> - Montana has not improved people’s access to emergency contraception in the ER.</td>
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### Reproductive Health Coverage: Guarantees and Restrictions

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<td><strong>YES</strong> - Montana covers low-income people’s access to medically necessary abortion care.</td>
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### COLOR KEY:
- 🟢 Restrictions Reproductive Freedom
- ⬠ Shows Mixed Support for Reproductive Freedom
- 🔵 Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

@NARAL

*SOURCE: Guttmacher Institute, 2017 data*
# Nebraska

**ACCESS FACT:** 40% of Nebraska women live in counties with no abortion clinic.

## Political Information

<table>
<thead>
<tr>
<th>EXECUTIVE</th>
<th>LEGISLATURE</th>
</tr>
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<tbody>
<tr>
<td>Governor Pete Ricketts (R) opposes reproductive freedom.</td>
<td>The Nebraska Senate opposes reproductive freedom.</td>
</tr>
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</table>

## Abortion Rights: Protections and Bans

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<td>NO - The Nebraska state constitution does not provide additional protection for the right to abortion.</td>
<td>YES - Nebraska bans the standard method for providing second trimester abortion care.</td>
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<td>YES - Nebraska unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.</td>
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## Reproductive Health: Access and Restrictions

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<td>NO - Nebraska does not guarantee that birth control prescriptions will be filled.</td>
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<th>EMERGENCY CONTRACEPTION</th>
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<td>NO - Nebraska has not improved people's access to emergency contraception in the ER.</td>
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## Reproductive Health Coverage: Guarantees and Restrictions

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<td>NO - Nebraska expressly prohibits abortion coverage in all or some of the private insurance market.</td>
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<tr>
<td>NO - Nebraska has not expanded coverage for Medicaid-funded family-planning services.</td>
<td>NO - Nebraska restricts low-income people's access to abortion.</td>
</tr>
</tbody>
</table>

## Color Key

- **● Restricts Reproductive Freedom**
- **◉ Shows Mixed Support for Reproductive Freedom**
- **○ Expands Reproductive Freedom**

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: [www.naral.org](http://www.naral.org)

@NARAL

*SOURCE: Guttmacher Institute, 2017 data*
## Nevada

**ACCESS FACT:** 9% of Nevada women live in counties with no abortion clinic.*

### Political Information

<table>
<thead>
<tr>
<th>EXECUTIVE</th>
<th>LEGISLATURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governor Steve Sisolak (D) supports reproductive freedom.</td>
<td>The Nevada Senate supports reproductive freedom. The Nevada House supports reproductive freedom.</td>
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</table>

### Abortion Rights: Protections and Bans

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<th>PROTECTIONS</th>
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<tr>
<td>NO - The Nevada state constitution does not provide additional protection for the right to abortion.</td>
<td>NO - Nevada does not ban the standard method for providing second trimester abortion care.</td>
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<tr>
<td>YES - Nevada has an affirmative right to abortion enshrined in state law.</td>
<td>NO - Nevada does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.</td>
</tr>
<tr>
<td>NO - Nevada does not ban abortion based on the reason a pregnant person may seek abortion care.</td>
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### Reproductive Health: Access and Restrictions

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<tr>
<th>EXPANDED SCOPE OF PRACTICE</th>
<th>CLINIC PROTECTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO - Nevada does not allow some qualified healthcare professionals to provide abortion services.</td>
<td>YES - Nevada law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.</td>
</tr>
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<tr>
<th>CLINIC SHUTDOWN LAWS</th>
<th>GUARANTEES AND REFUSALS OF MEDICAL CARE</th>
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<tr>
<td>YES - Nevada subjects abortion providers to restrictions not applied to other medical professionals.</td>
<td>Prescription Guarantees</td>
</tr>
<tr>
<td>YES - Nevada restrictions not applied to other medical professionals.</td>
<td>YES - Nevada guarantees that birth control prescriptions will be filled.</td>
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<td>NO - Nevada does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.</td>
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<td>YES - Nevada restricts young people’s access to abortion services by mandating parental notice.</td>
<td>NO - Nevada does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.</td>
</tr>
</tbody>
</table>

| EMERGENCY CONTRACEPTION | |
|-------------------------| |
| NO - Nevada has not improved people’s access to emergency contraception in the ER. | |

### Reproductive Health Coverage: Guarantees and Restrictions

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<tr>
<th>PRIVATE COVERAGE OF CONTRACEPTION</th>
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<tr>
<td>YES - Nevada law guarantees expanded coverage for contraceptive products.</td>
<td>Nevada has no provision guaranteeing or restricting insurance coverage of abortion.</td>
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<th>PUBLIC COVERAGE OF CONTRACEPTION</th>
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<tr>
<td>YES - Nevada has expanded coverage for some Medicaid-funded family-planning services.</td>
<td>NO - Nevada restricts low-income people’s access to abortion.</td>
</tr>
</tbody>
</table>

**COLOR KEY:** ![Restricts Reproductive Freedom](*) ![Shows Mixed Support for Reproductive Freedom](*) ![Expands Reproductive Freedom](*)

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**NARAL Pro-Choice Nevada**

[www.prochoicenevada.org](http://www.prochoicenevada.org)  [@NARALNV](http://www.prochoicenevada.org)

*SOURCE: Guttmacher Institute, 2017 data*
## New Hampshire

**ACCESS FACT:** 30% of New Hampshire women live in counties with no abortion clinic.*

### Political Information

<table>
<thead>
<tr>
<th>EXECUTIVE</th>
<th>LEGISLATURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governor Chris Sununu (R) opposes reproductive freedom.</td>
<td>The New Hampshire Senate opposes reproductive freedom. The New Hampshire House opposes reproductive freedom.</td>
</tr>
</tbody>
</table>

### Abortion Rights: Protections and Bans

<table>
<thead>
<tr>
<th>PROTECTIONS</th>
<th>BANS</th>
</tr>
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<tbody>
<tr>
<td>NO - The New Hampshire state constitution does not provide additional protection for the right to abortion.</td>
<td>NO - New Hampshire does not ban the standard method for providing second trimester abortion care.</td>
</tr>
<tr>
<td>NO - New Hampshire does not have an affirmative right to abortion enshrined in state law.</td>
<td>NO - New Hampshire does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.</td>
</tr>
<tr>
<td>NO - New Hampshire does not ban abortion based on the reason a pregnant person may seek abortion care.</td>
<td></td>
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### Reproductive Health: Access and Restrictions

<table>
<thead>
<tr>
<th>EXPANDED SCOPE OF PRACTICE</th>
<th>CLINIC PROTECTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES - New Hampshire expands the type of qualified healthcare professionals who can provide abortion services.</td>
<td>YES - New Hampshire law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.</td>
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</tbody>
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<th>CLINIC SHUTDOWN LAWS</th>
<th>GUARANTEES AND REFUSALS OF MEDICAL CARE</th>
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<tbody>
<tr>
<td>NO - New Hampshire treats abortion providers like other medical professionals.</td>
<td>Prescription Guarantees</td>
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<tr>
<td>NO - New Hampshire does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.</td>
<td>NO - New Hampshire does not guarantee that birth control prescriptions will be filled.</td>
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<th>BIASED COUNSELING AND MANDATORY DELAYS</th>
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<td>NO - New Hampshire does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.</td>
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### Reproductive Health Coverage: Guarantees and Restrictions

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<td>YES - New Hampshire provides increased coverage for Medicaid-funded family-planning services.</td>
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### COLOR KEY:
- ◯ Restricts Reproductive Freedom
- ◯ Shows Mixed Support for Reproductive Freedom
- ◯ Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: [www.naral.org](http://www.naral.org) @NARAL
New Jersey

ACCESS FACT: 26% of New Jersey women live in counties with no abortion clinic.*

Political Information

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<thead>
<tr>
<th>EXECUTIVE</th>
<th>LEGISLATURE</th>
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<tbody>
<tr>
<td>Governor Phil Murphy (D) supports reproductive freedom.</td>
<td>The New Jersey Senate supports reproductive freedom. The New Jersey House supports reproductive freedom.</td>
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Abortion Rights: Protections and Bans

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<tbody>
<tr>
<td>YES - The New Jersey state constitution provides protection for the right to abortion in addition to the U.S. Constitution.</td>
<td>NO - New Jersey does not ban the standard method for providing second trimester abortion care.</td>
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Reproductive Health Coverage: Guarantees and Restrictions

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<td>YES - New Jersey covers low-income people’s access to medically necessary abortion care.</td>
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COLOR KEY:  ● Restricts Reproductive Freedom  ○ Shows Mixed Support for Reproductive Freedom  ● Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

@NARAL

*SOURCE: Guttmacher Institute, 2017 data
New Mexico

Pre-Roe Ban: New Mexico has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned.

Access Fact: 48% of New Mexico women live in counties with no abortion clinic.*

Political Information

Executive
Governor Michelle Lujan Grisham (D) supports reproductive freedom.

Legislature
The New Mexico Senate supports reproductive freedom.
The New Mexico House supports reproductive freedom.

Abortion Rights: Protections and Bans

Protections
NO - The New Mexico state constitution does not provide additional protection for the right to abortion.
NO - New Mexico does not have an affirmative right to abortion enshrined in state law.

Bans
NO - New Mexico does not ban the standard method for providing second trimester abortion care.
NO - New Mexico does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
NO - New Mexico does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

Expanded Scope of Practice
YES - New Mexico expands the type of qualified healthcare professionals who can provide abortion services.

Clinic Shutdown Laws
YES - New Mexico subjects abortion providers to restrictions not applied to other medical professionals.

Biased Counseling and Mandatory Delays
NO - New Mexico does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

Young People and Abortion
YES - New Mexico restricts young people’s access to abortion services by mandating parental consent.

Emergency Contraception
YES - New Mexico law improves people’s access to emergency contraception in the ER.

Clinic Protections
NO - New Mexico law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

Guarantees and Refusals of Medical Care
Prescription Guarantees
NO - New Mexico does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals
YES - New Mexico allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

Counseling and Referral Bans
NO - New Mexico does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

Private Coverage of Contraception
YES - New Mexico law guarantees expanded coverage for contraceptive products.

Public Coverage of Contraception
YES - New Mexico provides increased coverage for Medicaid-funded family-planning services.

Private Coverage of Abortion
New Mexico has no provision guaranteeing or restricting insurance coverage of abortion.

Public Coverage of Abortion
YES - New Mexico covers low-income people’s access to medically necessary abortion care.

Color Key:  ● Restricts Reproductive Freedom | ○ Shows Mixed Support for Reproductive Freedom | ● Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org
   @NARAL

*SOURCE: Guttmacher Institute, 2017 data
## Political Information

**EXECUTIVE**  
Governor Andrew Cuomo (D) supports reproductive freedom.

**LEGISLATURE**  
The New York Senate supports reproductive freedom.  
The New York House supports reproductive freedom.

## Abortion Rights: Protections and Bans

### PROTECTIONS
- **NO** - The New York state constitution does not provide additional protection for the right to abortion.  
- **YES** - New York has an affirmative right to abortion enshrined in state law.

### BANS
- **NO** - New York does not ban the standard method for providing second trimester abortion care.  
- **NO** - New York does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.  
- **NO** - New York does not ban abortion based on the reason a pregnant person may seek abortion care.

## Reproductive Health: Access and Restrictions

### EXPANDED SCOPE OF PRACTICE
- **YES** - New York expands the type of qualified healthcare professionals who can provide abortion services.

### CLINIC SHUTDOWN LAWS
- **NO** - New York treats abortion providers like other medical professionals.

### BIASED COUNSELING AND MANDATORY DELAYS
- **NO** - New York does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

### YOUNG PEOPLE AND ABORTION
- **NO** - New York does not restrict young people’s access to abortion services by mandating parental notice or consent.

### EMERGENCY CONTRACEPTION
- **YES** - New York law improves people’s access to emergency contraception in the ER.

### CLINIC PROTECTIONS
- **YES** - New York law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

### GUARANTEES AND REFUSALS OF MEDICAL CARE

#### Prescription Guarantees
- **NO** - New York does not guarantee that birth control prescriptions will be filled.

#### Healthcare Refusals
- **YES** - New York allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

#### COUNSELING AND REFERRAL BANS
- **NO** - New York does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

## Reproductive Health Coverage: Guarantees and Restrictions

### PRIVATE COVERAGE OF CONTRACEPTION
- **YES** - New York law guarantees expanded coverage for contraceptive products.

### PUBLIC COVERAGE OF CONTRACEPTION
- **YES** - New York provides increased coverage for Medicaid-funded family-planning services.

### PRIVATE COVERAGE OF ABORTION
- **YES** - New York guarantees abortion coverage in the private insurance market.

### PUBLIC COVERAGE OF ABORTION
- **YES** - New York covers low-income people’s access to medically necessary abortion care.

**COLOR KEY:**  
- ![Restricts Reproductive Freedom](icon-restricts)  
- ![Shows Mixed Support for Reproductive Freedom](icon-mixed)  
- ![Expands Reproductive Freedom](icon-expand)

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**To get involved, please visit:** www.naral.org

@NARAL

*SOURCE: Guttmacher Institute, 2017 data*
### Political Information

**EXECUTIVE**
Governor Roy Cooper (D) supports reproductive freedom.

**LEGISLATURE**
The North Carolina Senate opposes reproductive freedom.
The North Carolina House opposes reproductive freedom.

### Abortion Rights: Protections and Bans

**PROTECTIONS**
- NO - The North Carolina state constitution does not provide additional protection for the right to abortion.
- NO - North Carolina does not have an affirmative right to abortion enshrined in state law.

**BANS**
- NO - North Carolina does not ban the standard method for providing second trimester abortion care.
- YES - North Carolina bans abortion based on the reason a pregnant person may seek abortion care.

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**
- NO - North Carolina does not allow some qualified healthcare professionals to provide abortion services.

**CLINIC SHUTDOWN LAWS**
- YES - North Carolina subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
- YES - North Carolina subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
- YES - North Carolina restricts young people’s access to abortion services by mandating parental consent.

**EMERGENCY CONTRACEPTION**
- NO - North Carolina has not improved people’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**
- YES - North Carolina law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**
- NO - North Carolina does not guarantee that birth control prescriptions will be filled.

**Healthcare Refusals**
- YES - North Carolina allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**
- NO - North Carolina does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**
- YES - North Carolina law guarantees expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- YES - North Carolina provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
- NO - North Carolina expressly prohibits abortion coverage in all or some of the private insurance market.

**PUBLIC COVERAGE OF ABORTION**
- NO - North Carolina restricts low-income people’s access to abortion.

### Color Key
- ● Restricts Reproductive Freedom
- ○ Shows Mixed Support for Reproductive Freedom
- ◯ Expands Reproductive Freedom

### While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

### NARAL Pro-Choice North Carolina
www.prochoicenc.org  @ProChoiceNC

*SOURCE: Guttmacher Institute, 2017 data*
# North Dakota

**TRIGGER BAN:** North Dakota has a trigger law to ban abortion if Roe v. Wade is overturned.

As of publication, North Dakota had only one abortion clinic remaining.

**ACCESS FACT:** 72% of North Dakota women live in counties with no abortion clinic.*

## Political Information

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<tr>
<th>EXECUTIVE</th>
<th>LEGISLATURE</th>
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<tbody>
<tr>
<td>Governor Doug Burgum (R) opposes reproductive freedom.</td>
<td>The North Dakota Senate opposes reproductive freedom.</td>
</tr>
<tr>
<td>The North Dakota House opposes reproductive freedom.</td>
<td></td>
</tr>
</tbody>
</table>

## Abortion Rights: Protections and Bans

### PROTECTIONS

- NO - The North Dakota state constitution does not provide additional protection for the right to abortion.
- NO - North Dakota does not have an affirmative right to abortion enshrined in state law.

### BANS

- YES - North Dakota bans the standard method for providing second trimester abortion care.
- YES - North Dakota unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.
- YES - North Dakota bans abortion based on the reason a pregnant person may seek abortion care.

## Reproductive Health: Access and Restrictions

### EXPANDED SCOPE OF PRACTICE

- NO - North Dakota does not allow some qualified healthcare professionals to provide abortion services.

### CLINIC SHUTDOWN LAWS

- YES - North Dakota subjects abortion providers to restrictions not applied to other medical professionals.

### BIASED COUNSELING AND MANDATORY DELAYS

- YES - North Dakota subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

### YOUNG PEOPLE AND ABORTION

- YES - North Dakota restricts young people’s access to abortion services by mandating parental consent.

### EMERGENCY CONTRACEPTION

- NO - North Dakota has not improved people’s access to emergency contraception in the ER.

### CLINIC PROTECTIONS

- NO - North Dakota law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

### GUARANTEES AND REFUSALS OF MEDICAL CARE

#### Prescription Guarantees

- NO - North Dakota does not guarantee that birth control prescriptions will be filled.

#### Healthcare Refusals

- YES - North Dakota allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

### COUNSELING AND REFERRAL BANS

- YES - North Dakota prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

## Reproductive Health Coverage: Guarantees and Restrictions

### PRIVATE COVERAGE OF CONTRACEPTION

- NO - North Dakota law does not guarantee expanded coverage for contraceptive products.

### PUBLIC COVERAGE OF CONTRACEPTION

- NO - North Dakota has not expanded coverage for Medicaid-funded family-planning services.

### PRIVATE COVERAGE OF ABORTION

- NO - North Dakota expressly prohibits abortion coverage in all or some of the private insurance market.

### PUBLIC COVERAGE OF ABORTION

- NO - North Dakota restricts low-income people’s access to abortion.

## COLOR KEY

- ● Restricts Reproductive Freedom
- ○ Shows Mixed Support for Reproductive Freedom
- ● Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

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*SOURCE: Guttmacher Institute, 2017 data*
**Ohio**

ACCESS FACT: 55% of Ohio women live in counties with no abortion clinic.*

### Political Information

**EXECUTIVE**  
Governor Mike DeWine (R) opposes reproductive freedom.

**LEGISLATURE**  
The Ohio Senate opposes reproductive freedom.  
The Ohio House opposes reproductive freedom.

### Abortion Rights: Protections and Bans

<table>
<thead>
<tr>
<th>PROTECTIONS</th>
<th>BANS</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO - The Ohio state constitution does not provide additional protection for the right to abortion.</td>
<td>YES - Ohio bans the standard method for providing second trimester abortion care.</td>
</tr>
<tr>
<td>NO - Ohio does not have an affirmative right to abortion enshrined in state law.</td>
<td>YES - Ohio unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.</td>
</tr>
<tr>
<td>YES - Ohio bans abortion based on the reason a pregnant person may seek abortion care.</td>
<td></td>
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</table>

### Reproductive Health: Access and Restrictions

<table>
<thead>
<tr>
<th>EXPANDED SCOPE OF PRACTICE</th>
<th>CLINIC PROTECTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO - Ohio does not allow some qualified healthcare professionals to provide abortion services.</td>
<td>NO - Ohio law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.</td>
</tr>
<tr>
<td>CLINIC SHUTDOWN LAWS</td>
<td>GUARANTEES AND REFUSALS OF MEDICAL CARE</td>
</tr>
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<td>YES - Ohio subjects abortion providers to restrictions not applied to other medical professionals.</td>
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<td>YOUNG PEOPLE AND ABORTION</td>
<td>Healthcare Refusals</td>
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<tr>
<td>YES - Ohio restricts young people's access to abortion services by mandating parental consent.</td>
<td>YES - Ohio allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.</td>
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<td>EMERGENCY CONTRACEPTION</td>
<td>COUNSELING AND REFERRAL BANS</td>
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<tr>
<td>NO - Ohio has not improved people's access to emergency contraception in the ER.</td>
<td>YES - Ohio prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.</td>
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### Reproductive Health Coverage: Guarantees and Restrictions

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<tr>
<td>PUBLIC COVERAGE OF CONTRACEPTION</td>
<td>PUBLIC COVERAGE OF ABORTION</td>
</tr>
<tr>
<td>NO - Ohio has not expanded coverage for Medicaid-funded family-planning services.</td>
<td>NO - Ohio restricts low-income people’s access to abortion.</td>
</tr>
</tbody>
</table>

**COLOR KEY:**  
- ○ Restricts Reproductive Freedom  
- ● Shows Mixed Support for Reproductive Freedom  
- ● Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Ohio  
www.prochoiceoh.org  
@ProChoiceOH

*SOURCE: Guttmacher Institute, 2017 data*
**Oklahoma**

**PRE-ROE BAN:** Oklahoma has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned

**ACCESS FACT:** 53% of Oklahoma women live in counties with no abortion clinic.*

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### Political Information

**EXECUTIVE**
Governor Kevin Stitt (R) **opposes reproductive freedom.**

**LEGISLATURE**
The Oklahoma Senate **opposes reproductive freedom.**
The Oklahoma House **opposes reproductive freedom.**

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### Abortion Rights: Protections and Bans

**PROTECTIONS**
- **NO** - The Oklahoma state constitution does not provide additional protection for the right to abortion.
- **NO** - Oklahoma does not have an affirmative right to abortion enshrined in state law.

**BANS**
- **YES** - Oklahoma bans the standard method for providing second trimester abortion care.
- **YES** - Oklahoma unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.
- **YES** - Oklahoma bans abortion based on the reason a pregnant person may seek abortion care.

---

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**
- **NO** - Oklahoma does not allow some qualified healthcare professionals to provide abortion services.

**CLINIC SHUTDOWN LAWS**
- **YES** - Oklahoma subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
- **YES** - Oklahoma subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
- **YES** - Oklahoma restricts young people’s access to abortion services by mandating parental notice and consent.

**EMERGENCY CONTRACEPTION**
- **NO** - Oklahoma has not improved people’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**
- **NO** - Oklahoma law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**
- **Prescription Guarantees**
  - **NO** - Oklahoma does not guarantee that birth control prescriptions will be filled.

- **Healthcare Refusals**
  - **YES** - Oklahoma allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

- **COUNSELING AND REFERRAL BANS**
  - **YES** - Oklahoma prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

---

### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**
- **NO** - Oklahoma law does not guarantee expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- **YES** - Oklahoma provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
- **NO** - Oklahoma expressly prohibits abortion coverage in all or some of the private insurance market.

**PUBLIC COVERAGE OF ABORTION**
- **NO** - Oklahoma restricts low-income people’s access to abortion.

---

**COLOR KEY:**
- 📝 Restricts Reproductive Freedom | 🟢 Shows Mixed Support for Reproductive Freedom | 🟠 Expands Reproductive Freedom

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To get involved, please visit: [www.naral.org](http://www.naral.org)

*SOURCE: Guttmacher Institute, 2017 data*
Oregon

ACCESS FACT: 23% of Oregon women live in counties with no abortion clinic.*

Political Information

EXECUTIVE
Governor Kate Brown (D) supports reproductive freedom.

LEGISLATURE
The Oregon Senate supports reproductive freedom.
The Oregon House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS
NO - The Oregon state constitution does not provide additional protection for the right to abortion.
YES - Oregon has an affirmative right to abortion enshrined in state law.

BANS
NO - Oregon does not ban the standard method for providing second trimester abortion care.
NO - Oregon does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
NO - Oregon does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE
YES - Oregon expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS
NO - Oregon treats abortion providers like other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS
NO - Oregon does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION
NO - Oregon does not restrict young people’s access to abortion services by mandating parental notice or consent.

EMERGENCY CONTRACEPTION
YES - Oregon law improves people’s access to emergency contraception in the ER.

CLINIC PROTECTIONS
YES - Oregon law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE
Prescription Guarantees
NO - Oregon does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals
YES - Oregon allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS
NO - Oregon does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION
YES - Oregon law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION
YES - Oregon provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION
YES - Oregon guarantees abortion coverage in the private insurance market.

PUBLIC COVERAGE OF ABORTION
YES - Oregon covers low-income people’s access to abortion without restrictions.

COLOR KEY: ○ Restricts Reproductive Freedom | ☑ Shows Mixed Support for Reproductive Freedom | ☠ Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

NARAL Pro-Choice Oregon
www.prochoiceoregon.org ✪ @ProChoiceOregon

*SOURCE: Guttmacher Institute, 2017 data
### Political Information

**EXECUTIVE**
Governor Tom Wolf (D) **supports reproductive freedom.**

**LEGISLATURE**
The Pennsylvania Senate **opposes reproductive freedom.**
The Pennsylvania House **opposes reproductive freedom.**

### Abortion Rights: Protections and Bans

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### Reproductive Health: Access and Restrictions

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<td>YES - Pennsylvania subjects abortion providers to restrictions not applied to other medical professionals.</td>
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<td>COUNSELING AND REFERRAL BANS</td>
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<td></td>
</tr>
<tr>
<td>EMERGENCY CONTRACEPTION</td>
<td></td>
</tr>
<tr>
<td>YES - Pennsylvania law expands access but includes a refusal clause making expanded access to emergency contraception in the ER effectively unavailable.</td>
<td></td>
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### Reproductive Health Coverage: Guarantees and Restrictions

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<tr>
<td>PUBLIC COVERAGE OF CONTRACEPTION</td>
<td>PUBLIC COVERAGE OF ABORTION</td>
</tr>
<tr>
<td>YES - Pennsylvania provides increased coverage for Medicaid-funded family-planning services.</td>
<td>NO - Pennsylvania restricts low-income people's access to abortion.</td>
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</table>

**COLOR KEY:**
- 🌈 Extends Reproductive Freedom
- 🌐 Shows Mixed Support for Reproductive Freedom
- ☠ Restrictions Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: [www.naral.org](http://www.naral.org)

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*SOURCE: Guttmacher Institute, 2017 data*
Rhode Island

ACCESS FACT: 22% of Rhode Island women live in counties with no abortion clinic.*

Political Information

EXECUTIVE
Governor Gina Raimondo (D) supports reproductive freedom.

LEGISLATURE
The Rhode Island Senate has a mixed record on reproductive freedom.
The Rhode Island House supports reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS
- NO - The Rhode Island state constitution does not provide additional protection for the right to abortion.
- YES - Rhode Island has an affirmative right to abortion enshrined in state law.

BANS
- NO - Rhode Island does not ban the standard method for providing second trimester abortion care.
- NO - Rhode Island does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
- NO - Rhode Island does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE
- YES - Rhode Island expands the type of qualified healthcare professionals who can provide abortion services.

CLINIC SHUTDOWN LAWS
- YES - Rhode Island subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS
- YES - Rhode Island subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION
- YES - Rhode Island restricts young people’s access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION
- NO - Rhode Island has not improved people’s access to emergency contraception in the ER.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION
- YES - Rhode Island law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION
- YES - Rhode Island provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION
Rhode Island has no provision guaranteeing or restricting insurance coverage of abortion.

PUBLIC COVERAGE OF ABORTION
- NO - Rhode Island restricts low-income people’s access to abortion.

COLOR KEY: ◼ Restricts Reproductive Freedom | ◼ Shows Mixed Support for Reproductive Freedom | ◼ Expands Reproductive Freedom

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To get involved, please visit: www.naral.org

*SOURCE: Guttmacher Institute, 2017 data
South Carolina

ACCESS FACT: 71% of South Carolina women live in counties with no abortion clinic.* 

Severely Restricted Access

Political Information

EXECUTIVE
Governor Henry McMaster (R) opposes reproductive freedom.

LEGISLATURE
The South Carolina Senate opposes reproductive freedom.
The South Carolina House opposes reproductive freedom.

Abortion Rights: Protections and Bans

PROTECTIONS
NO - The South Carolina state constitution does not provide additional protection for the right to abortion.
NO - South Carolina does not have an affirmative right to abortion enshrined in state law.

BANS
NO - South Carolina does not ban the standard method for providing second trimester abortion care.
YES - South Carolina unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.
NO - South Carolina does not ban abortion based on the reason a pregnant person may seek abortion care.

Reproductive Health: Access and Restrictions

EXPANDED SCOPE OF PRACTICE
NO - South Carolina does not allow some qualified healthcare professionals to provide abortion services.

CLINIC SHUTDOWN LAWS
YES - South Carolina subjects abortion providers to restrictions not applied to other medical professionals.

BIASED COUNSELING AND MANDATORY DELAYS
YES - South Carolina subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

YOUNG PEOPLE AND ABORTION
YES - South Carolina restricts young people’s access to abortion services by mandating parental consent.

EMERGENCY CONTRACEPTION
YES - South Carolina law improves people’s access to emergency contraception in the ER.

CLINIC PROTECTIONS
NO - does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

GUARANTEES AND REFUSALS OF MEDICAL CARE
Prescription Guarantees
NO - South Carolina does not guarantee that birth control prescriptions will be filled.

Healthcare Refusals
YES - South Carolina allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

COUNSELING AND REFERRAL BANS
YES - South Carolina prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion.

Reproductive Health Coverage: Guarantees and Restrictions

PRIVATE COVERAGE OF CONTRACEPTION
YES - South Carolina law guarantees expanded coverage for contraceptive products.

PUBLIC COVERAGE OF CONTRACEPTION
YES - South Carolina provides increased coverage for Medicaid-funded family-planning services.

PRIVATE COVERAGE OF ABORTION
NO - South Carolina expressly prohibits abortion coverage in all or some of the private insurance market.

PUBLIC COVERAGE OF ABORTION
NO - South Carolina restricts low-income people’s access to abortion.

COLOR KEY:  ● Restricts Reproductive Freedom | ○ Shows Mixed Support for Reproductive Freedom | ● Expands Reproductive Freedom

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*SOURCE: Guttmacher Institute, 2017 data
South Dakota

**TRIGGER BAN:** South Dakota has a trigger law to ban abortion if *Roe v. Wade* is overturned.

As of publication, South Dakota had only one abortion clinic remaining.

**ACCESS FACT:** 76% of South Dakota women live in counties with no abortion clinic.*

### Political Information

**EXECUTIVE**

Governor Kristi Noem (R) opposes reproductive freedom.

**LEGISLATURE**

The South Dakota Senate opposes reproductive freedom.

The South Dakota House opposes reproductive freedom.

### Abortion Rights: Protections and Bans

**PROTECTIONS**

- NO - The South Dakota state constitution does not provide additional protection for the right to abortion.
- NO - South Dakota does not have an affirmative right to abortion enshrined in state law.

**BANS**

- NO - South Dakota does not ban the standard method for providing second trimester abortion care.
- YES - South Dakota unconstitutionally bans abortion throughout pregnancy in violation of *Roe v. Wade*.
- YES - South Dakota bans abortion based on the reason a pregnant person may seek abortion care.

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**

- NO - South Dakota does not allow some qualified healthcare professionals to provide abortion services.

**CLINIC SHUTDOWN LAWS**

- YES - South Dakota subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**

- YES - South Dakota subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**

- YES - South Dakota restricts young people’s access to abortion services by mandating parental notice.

**EMERGENCY CONTRACEPTION**

- NO - South Dakota has not improved people’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**

- NO - South Dakota law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**

- NO - South Dakota does not guarantee that birth control prescriptions will be filled.

**Healthcare Refusals**

- YES - South Dakota allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**

- NO - South Dakota does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**

- NO - South Dakota law does not guarantee expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**

- YES - South Dakota has expanded coverage for some Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**

- NO - South Dakota expressly prohibits abortion coverage in all or some of the private insurance market.

**PUBLIC COVERAGE OF ABORTION**

- NO - South Dakota restricts low-income people’s access to abortion.

COLOR KEY: [●] Restricts Reproductive Freedom | [○] Shows Mixed Support for Reproductive Freedom | [●●] Expands Reproductive Freedom

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To get involved, please visit: www.naral.org

[@NARAL](https://twitter.com/NARAL)

*SOURCE: Guttmacher Institute, 2017 data*
**Tennessee**

**TRIGGER BAN:** Tennessee has a trigger law to ban abortion if Roe v. Wade is overturned.

**ACCESS FACT:** 63% of Tennessee women live in counties with no abortion clinic.*

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### Political Information

**EXECUTIVE**

Governor Bill Lee (R) opposes reproductive freedom.

**LEGISLATURE**

The Tennessee Senate opposes reproductive freedom.

The Tennessee House opposes reproductive freedom.

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### Abortion Rights: Protections and Bans

**PROTECTIONS**

- NO - The Tennessee state constitution does not provide additional protection for the right to abortion.
- NO - Tennessee does not have an affirmative right to abortion enshrined in state law.

**BANS**

- NO - Tennessee does not ban the standard method for providing second trimester abortion care.
- YES - Tennessee bans abortion based on the reason a pregnant person may seek abortion care.

---

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**

- NO - Tennessee does not allow some qualified healthcare professionals to provide abortion services.

**CLINIC SHUTDOWN LAWS**

- YES - Tennessee subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**

- YES - Tennessee subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**

- YES - Tennessee restricts young people’s access to abortion services by mandating parental consent.

**EMERGENCY CONTRACEPTION**

- NO - Tennessee has not improved people’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**

- NO - Tennessee law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**

- NO - Tennessee does not guarantee that birth control prescriptions will be filled.

**Healthcare Refusals**

- YES - Tennessee allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**

- NO - Tennessee does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

---

### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**

- NO - Tennessee law does not guarantee expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**

- NO - Tennessee has not expanded coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**

- NO - Tennessee expressly prohibits abortion coverage in all or some of the private insurance market.

**PUBLIC COVERAGE OF ABORTION**

- NO - Tennessee restricts low-income people’s access to abortion.

---

**COLOR KEY:**  ● Restricts Reproductive Freedom | ○ Shows Mixed Support for Reproductive Freedom | ● Expands Reproductive Freedom

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To get involved, please visit: www.naral.org

@NARAL

*SOURCE: Guttmacher Institute, 2017 data
While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

@NARAL

*SOURCE: Guttmacher Institute, 2017 data
**Utah**

**TRIGGER BAN:** Utah has a trigger law to ban abortion if Roe v. Wade is overturned.

**ACCESS FACT:** 63% of Utah women live in counties with no abortion clinic.*

### Political Information

**EXECUTIVE**

Governor Spencer Cox (R) opposes reproductive freedom.

**LEGISLATURE**

The Utah Senate opposes reproductive freedom.
The Utah House opposes reproductive freedom.

### Abortion Rights: Protections and Bans

<table>
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<th>PROTECTIONS</th>
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<tbody>
<tr>
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<td>NO - Utah does not ban the standard method for providing second trimester abortion care.</td>
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<tr>
<td>NO - Utah does not have an affirmative right to abortion enshrined in state law.</td>
<td>YES - Utah unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade.</td>
</tr>
<tr>
<td>YES - Utah bans abortion based on the reason a pregnant person may seek abortion care.</td>
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### Reproductive Health: Access and Restrictions

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<tr>
<th>EXPANDED SCOPE OF PRACTICE</th>
<th>CLINIC PROTECTIONS</th>
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<td>NO - Utah does not allow some qualified healthcare professionals to provide abortion services.</td>
<td>NO - Utah law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.</td>
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<th>GUARANTEES AND REFUSALS OF MEDICAL CARE</th>
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<tr>
<td>YES - Utah subjects abortion providers to restrictions not applied to other medical professionals.</td>
<td>Prescription Guarantees</td>
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<tr>
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<td>YES - Utah restricts young people’s access to abortion services by mandating parental notice and consent.</td>
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<th>EMERGENCY CONTRACEPTION</th>
<th>COUNSELING AND REFERRAL BANS</th>
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<td>YES - Utah law improves people’s access to emergency contraception in the ER.</td>
<td>NO - Utah does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.</td>
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### Reproductive Health Coverage: Guarantees and Restrictions

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<tr>
<th>PRIVATE COVERAGE OF CONTRACEPTION</th>
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<tbody>
<tr>
<td>NO - Utah law does not guarantee expanded coverage for contraceptive products.</td>
<td>NO - Utah expressly prohibits abortion coverage in all or some of the private insurance market.</td>
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<tr>
<th>PUBLIC COVERAGE OF CONTRACEPTION</th>
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</tr>
</thead>
<tbody>
<tr>
<td>NO - Utah has not expanded coverage for Medicaid-funded family-planning services.</td>
<td>NO - Utah restricts low-income people’s access to abortion.</td>
</tr>
</tbody>
</table>

**COLOR KEY:**  ● Restricts Reproductive Freedom | ○ Shows Mixed Support for Reproductive Freedom | ➡ Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**To get involved, please visit:** www.naral.org

@NARAL

*SOURCE: Guttmacher Institute, 2017 data*
While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

To get involved, please visit: www.naral.org

@NARAL

*SOURCE: Guttmacher Institute, 2017 data
While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**Virginia**

ACCESS FACT: 80% of Virginia women live in counties with no abortion clinic.*

**Political Information**

**EXECUTIVE**
Governor Ralph Northam (D) supports reproductive freedom.

**LEGISLATURE**
The Virginia Senate supports reproductive freedom.
The Virginia House supports reproductive freedom.

**Abortion Rights: Protections and Bans**

**PROTECTIONS**
- **NO** - The Virginia state constitution does not provide additional protection for the right to abortion.
- **NO** - Virginia does not have an affirmative right to abortion enshrined in state law.

**BANS**
- **NO** - Virginia does not ban the standard method for providing second trimester abortion care.
- **NO** - Virginia does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.
- **NO** - Virginia does not ban abortion based on the reason a pregnant person may seek abortion care.

**Reproductive Health: Access and Restrictions**

**EXPANDED SCOPE OF PRACTICE**
- **YES** - Virginia expands the type of qualified healthcare professionals who can provide abortion services.

**CLINIC SHUTDOWN LAWS**
- **NO** - Virginia treats abortion providers like other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
- **NO** - Virginia does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
- **YES** - Virginia restricts young people’s access to abortion services by mandating parental notice and consent.

**EMERGENCY CONTRACEPTION**
- **YES** - Virginia law improves people’s access to emergency contraception in the ER.

**Reproductive Health Coverage: Guarantees and Restrictions**

**PRIVATE COVERAGE OF CONTRACEPTION**
- **YES** - Virginia law guarantees expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- **YES** - Virginia provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
- **NO** - Virginia expressly prohibits abortion coverage in all or some of the private insurance market.

**PUBLIC COVERAGE OF ABORTION**
- **NO** - Virginia restricts low-income people’s access to abortion.

**COLOR KEY:**
- Reduces Reproductive Freedom
- Shows Mixed Support for Reproductive Freedom
- Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**NARAL Pro-Choice Virginia**
www.prochoiceva.org  @NARALVirginia

*SOURCE: Guttmacher Institute, 2017 data
**Political Information**

**EXECUTIVE**
Governor Jay Inslee (D) supports reproductive freedom.

**LEGISLATURE**
The Washington Senate supports reproductive freedom.  
The Washington House supports reproductive freedom.

### Abortion Rights: Protections and Bans

**PROTECTIONS**
- **NO** - The Washington state constitution does not provide additional protection for the right to abortion.  
- **YES** - Washington has an affirmative right to abortion enshrined in state law.

**BANS**
- **NO** - Washington does not ban the standard method for providing second trimester abortion care.  
- **NO** - Washington does not unconstitutionally ban abortion throughout pregnancy in violation of Roe v. Wade.  
- **NO** - Washington does not ban abortion based on the reason a pregnant person may seek abortion care.

### Reproductive Health: Access and Restrictions

**EXPANDED SCOPE OF PRACTICE**
- **YES** - Washington expands the type of qualified healthcare professionals who can provide abortion services.

**CLINIC SHUTDOWN LAWS**
- **YES** - Washington subjects abortion providers to restrictions not applied to other medical professionals.

**BIASED COUNSELING AND MANDATORY DELAYS**
- **NO** - Washington does not subject pregnant people seeking abortion care to biased counseling requirements or mandatory waiting periods.

**YOUNG PEOPLE AND ABORTION**
- **NO** - Washington does not restrict young people’s access to abortion services by mandating parental notice or consent.

**EMERGENCY CONTRACEPTION**
- **YES** - Washington law improves people’s access to emergency contraception in the ER.

**CLINIC PROTECTIONS**
- **YES** - Washington law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.

**GUARANTEES AND REFUSALS OF MEDICAL CARE**

**Prescription Guarantees**
- **YES** - Washington guarantees that birth control prescriptions will be filled.

**Healthcare Refusals**
- **YES** - Washington allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals.

**COUNSELING AND REFERRAL BANS**
- **NO** - Washington does not prohibit some organizations or individuals that receive state funds from counseling and/or referring for abortion.

### Reproductive Health Coverage: Guarantees and Restrictions

**PRIVATE COVERAGE OF CONTRACEPTION**
- **YES** - Washington law guarantees expanded coverage for contraceptive products.

**PUBLIC COVERAGE OF CONTRACEPTION**
- **YES** - Washington provides increased coverage for Medicaid-funded family-planning services.

**PRIVATE COVERAGE OF ABORTION**
- **YES** - Washington guarantees abortion coverage in the private insurance market.

**PUBLIC COVERAGE OF ABORTION**
- **YES** - Washington covers low-income people’s access to abortion without restrictions.

**COLOR KEY:**
- ● Restricts Reproductive Freedom  
- ○ Shows Mixed Support for Reproductive Freedom  
- ● Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.

**NARAL Pro-Choice Washington**
www.prochoicewashington.org  
@ProChoiceWA

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*SOURCE: Guttmacher Institute, 2017 data*
**West Virginia**

**PRE-ROE BAN:** West Virginia has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned.

As of publication, West Virginia had only one abortion clinic remaining.

**ACCESS FACT:** 90% of West Virginia women live in counties with no abortion clinic.*

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**Political Information**

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<tr>
<th>EXECUTIVE</th>
<th>LEGISLATURE</th>
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<tbody>
<tr>
<td>Governor Jim Justice (R) <strong>opposes</strong> reproductive freedom.</td>
<td>The West Virginia Senate <strong>opposes</strong> reproductive freedom. The West Virginia House <strong>opposes</strong> reproductive freedom.</td>
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**Abortion Rights: Protections and Bans**

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<td>YES - West Virginia bans the standard method for providing second trimester abortion care.</td>
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<td>NO - West Virginia does not have an affirmative right to abortion enshrined in state law.</td>
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<td>NO - West Virginia does not ban abortion based on the reason a pregnant person may seek abortion care.</td>
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**Reproductive Health:** Access and Restrictions

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<tr>
<th>EXPANDED SCOPE OF PRACTICE</th>
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<tr>
<td>West Virginia has no measure defining which medical professionals may provide abortion.</td>
<td>NO - West Virginia law does not protect people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence.</td>
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<td>EMERGENCY CONTRACEPTION</td>
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**Reproductive Health Coverage: Guarantees and Restrictions**

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<td>PUBLIC COVERAGE OF CONTRACEPTION</td>
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<td>NO - West Virginia has not expanded coverage for Medicaid-funded family-planning services.</td>
<td>NO - West Virginia restricts low-income people’s access to abortion.</td>
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---

*SOURCE: Guttmacher Institute, 2017 data*
**Wisconsin**

**PRE-ROE BAN:** Wisconsin has a pre-Roe ban which could impact abortion if Roe v. Wade is overturned.

**ACCESS FACT:** 70% of Wisconsin women live in counties with no abortion clinic.*

### Political Information

<table>
<thead>
<tr>
<th><strong>EXECUTIVE</strong></th>
<th>Governor Tony Evers (D) supports reproductive freedom.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>LEGISLATURE</strong></td>
<td>The Wisconsin Senate opposes reproductive freedom. &lt;br&gt;The Wisconsin House opposes reproductive freedom.</td>
</tr>
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</table>

### Abortion Rights: Protections and Bans

| **PROTECTIONS** | NO - The Wisconsin state constitution does not provide additional protection for the right to abortion. <br>NO - Wisconsin does not have an affirmative right to abortion enshrined in state law. |
| **BANS** | NO - Wisconsin does not ban the standard method for providing second trimester abortion care. <br>YES - Wisconsin unconstitutionally bans abortion throughout pregnancy in violation of Roe v. Wade. <br>NO - Wisconsin does not ban abortion based on the reason a pregnant person may seek abortion care. |

### Reproductive Health: Access and Restrictions

| **EXPANDED SCOPE OF PRACTICE** | NO - Wisconsin does not allow some qualified healthcare professionals to provide abortion services. |
| **CLINIC PROTECTIONS** | YES - Wisconsin law protects people seeking reproductive healthcare and/or clinic personnel from blockades, harassment, and/or violence. |
| **CLINIC SHUTDOWN LAWS** | YES - Wisconsin subjects abortion providers to restrictions not applied to other medical professionals. |
| **GUARANTEES AND REFUSALS OF MEDICAL CARE** | YES - Wisconsin guarantees that birth control prescriptions will be filled. |
| **BIASED COUNSELING AND MANDATORY DELAYS** | YES - Wisconsin subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods. |
| **Healthcare Refusals** | YES - Wisconsin allows certain organizations or individuals to refuse to provide people specific reproductive-health services, information, or referrals. |
| **YOUNG PEOPLE AND ABORTION** | YES - Wisconsin restricts young people's access to abortion services by mandating parental consent. |
| **COUNSELING AND REFERRAL BANS** | YES - Wisconsin prohibits some organizations or individuals that receive state funds from counseling and/or referring for abortion. |
| **EMERGENCY CONTRACEPTION** | YES - Wisconsin law improves people's access to emergency contraception in the ER. |

### Reproductive Health Coverage: Guarantees and Restrictions

| **PRIVATE COVERAGE OF CONTRACEPTION** | YES - Wisconsin law guarantees expanded coverage for contraceptive products. |
| **PRIVATE COVERAGE OF ABORTION** | NO - Wisconsin expressly prohibits abortion coverage in all or some of the private insurance market. |
| **PUBLIC COVERAGE OF CONTRACEPTION** | YES - Wisconsin provides increased coverage for Medicaid-funded family-planning services. |
| **PUBLIC COVERAGE OF ABORTION** | NO - Wisconsin restricts low-income people's access to abortion. |

COLOR KEY:  

- ⬤ Restricts Reproductive Freedom  
- 🔄 Shows Mixed Support for Reproductive Freedom  
- ⬤ Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts. 

To get involved, please visit: [www.naral.org](http://www.naral.org)  

[@NARAL](https://twitter.com/NARAL)
**Wyoming**

ACCESS FACT: 96% of Wyoming women live in counties with no abortion clinic.*

## Political Information

<table>
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<tr>
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<th>LEGISLATURE</th>
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| Governor Mark Gordon (R) opposes reproductive freedom. | The Wyoming Senate opposes reproductive freedom.  
The Wyoming House opposes reproductive freedom. |

## Abortion Rights: Protections and Bans

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## Reproductive Health: Access and Restrictions

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<th>EXPANDED SCOPE OF PRACTICE</th>
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<td>NO - Wyoming does not allow some qualified healthcare professionals to provide abortion services.</td>
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<td>YES - Wyoming subjects pregnant people seeking abortion care to biased counseling requirements and/or mandatory waiting periods for young people.</td>
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<th>EMERGENCY CONTRACEPTION</th>
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<td>NO - Wyoming has not improved people’s access to emergency contraception in the ER.</td>
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## Reproductive Health Coverage: Guarantees and Restrictions

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<td>YES - Wyoming provides increased coverage for Medicaid-funded family-planning services.</td>
<td>NO - Wyoming restricts low-income people’s access to abortion.</td>
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COLOR KEY:  
- ● Restricts Reproductive Freedom  |  ○ Shows Mixed Support for Reproductive Freedom  |  ● Expands Reproductive Freedom

While these laws remain on the books, some have been temporarily or permanently blocked. For more information, please see Fast Facts.  

NARAL Pro-Choice Wyoming  
www.prochoicewyoming.org

*SOURCE: Guttmacher Institute, 2017 data
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 Reproductive Freedom in the United States. Source documents are maintained by NARAL Pro-Choice America.

Access Facts


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 constitutional provisions, statutes, regulations, court decisions, ballot measures, opinions of state attorneys general, state policies, and other governmental actions with statewide effect.

Counts of enacted pro-choice and anti-choice measures provided on the “Key Findings” pages include all measures enacted during the year, not just those described in more detail on the “Fast Facts” pages.

Reproductive Healthcare Access Meter

Who Decides? reflects the legal state of people’s access to reproductive-health services in the previous calendar year. (Note: the Political Landscape data reflect the year ahead.)

The state’s overall status of reproductive freedom, previously indicated by a letter grade, now is represented by a graphical scale. As always, a state’s rating is 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 reproductive rights.

Points are subtracted for measures that oppose reproductive freedom and added for measures that support reproductive freedom. Measures that impose the greatest burdens on people are weighted most heavily. Statutes that have been enjoined or struck down by courts receive either full or partial “credit” in points.

As of 2020, no state has achieved “Total Access” as there are still obstacles to people receiving access to reproductive healthcare in every state.

Abortion Rights: Protections and Bans

● POST-ROE OUTLOOK: ABORTION IN THE STATES

STATUTORY PROTECTIONS FOR ABORTION
Points were added if a state has codified the protections of Roe v. Wade and provides an affirmative right to abortion.

STATE CONSTITUTIONAL PROTECTIONS FOR ABORTION
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 abortion.

● STATES AT RISK FOR AN IMMEDIATE BAN ON ABORTION

PRE-ROE CRIMINAL BANS ON ABORTION, TRIGGER BANS
Points were subtracted based either on the point in pregnancy when the ban begins, or for any ban whose effective date would be triggered if the Supreme Court overturns Roe v. Wade.
**BANS ON ABORTION BY WEEK**
Points were subtracted for each abortion ban based on the point in pregnancy when the ban begins.

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.

**BANS BASED ON METHOD OF ABORTION CARE**
Points were subtracted for each statute that bans a specific abortion procedure.

**BANS BASED ON THE REASON A PERSON MAY SEEK ABORTION CARE**
Points were subtracted for each abortion ban that holds providers legally liable for the reasons a person may seek abortion care, including the potential race or sex of the pregnancy, or in cases of fetal diagnosis.

**Reproductive Health: Access and Restrictions**

**EXPANDED SCOPE OF PRACTICE**
Points were added if a state expands the scope of practice for advanced practice clinicians to provide abortion care.

**EMERGENCY CONTRACEPTION**
Points were added if the state ensures that sexual assault survivors receive counseling about and access to emergency contraception (EC) in emergency rooms; if a state provides for improved public education about EC; or if a state has a measure that improves access to EC in another way. If the state's Medicaid program covers over-the-counter EC, this information can be found on the Public Coverage of Contraception Fast Facts page. If a state has a policy requiring insurance coverage of unique contraceptive products, this information can be found on the Private Coverage of Contraception Fast Facts page.

**CLINIC PROTECTIONS**
Points were allocated based on the strength of the protection. States that have proactive laws—bubble and buffer zones—received more points than states with responsive policies that penalize offenders after they interfere with entry or exit to a facility; physically invade a facility (including trespassing, property damage, arson, and bombing); make excessive noise, odors, or telephone calls; harass clinic staff or patients; and/or make threats, including weapon possession at demonstrations.

**GUARANTEES & REFUSALS OF MEDICAL CARE**

**REFUSALS**
Points were subtracted for the total strength of the measures in which individuals or organizations may refuse to provide, cover, counsel about, or refer for reproductive-health services. No points were subtracted for measures that allow individual healthcare providers to refuse to offer a service as long as they refer the patient to another provider that does offer the service.

**GUARANTEES**
Points were added if a state explicitly guarantees a person’s right to have their birth control prescription filled. Points were also added if the state ensures that pharmacists are allowed to provide EC to a person 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 to all customers.) Points were added as well for measures that guarantee employees cannot be discriminated against because of a reproductive-healthcare decision.

**CLINIC SHUTDOWN LAWS**
Points were allocated based on the breadth and severity of all targeted regulation of abortion providers measures imposed.

**YOUNG PEOPLE & ABORTION**
Points were subtracted based on whether and whose consent or notice is required before a young person may obtain abortion services.

**BIASED COUNSELING & MANDATORY DELAYS**
Points were allocated based on whether the patient must receive state-prepared materials, whether the patient must receive other material—oral or written—that contains biased information, the length of the waiting period, whether multiple trips are required, and whether a physician is required personally to provide specified 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 & REFERRAL BANS**
Points were subtracted if a ban applies to counseling and/or referrals for abortion care.
Reproductive Health Coverage: Guarantees and Restrictions

- **PRIVATE COVERAGE OF CONTRACEPTION**
  Points were added if a state requires health insurance plans to cover contraceptives to the same extent that they cover other prescription medication; if a state prohibits cost-sharing for contraceptive products; if the state requires health plans cover 12-months of contraception dispensed at once; and/or if a state requires health plans to cover all FDA-approved unique contraceptive products.

- **PUBLIC COVERAGE OF CONTRACEPTION**
  Points were added if the state provides increased coverage for family-planning services through a federal Medicaid waiver or through a state plan amendment. Points were also added if the state's Medicaid program covers over-the-counter EC without a prescription or 12-months of birth control dispensed at once.

- **PRIVATE COVERAGE OF ABORTION**
  **COVERAGE**
  Points were added if a state guarantees insurance coverage of abortion in the entire private insurance market or the state health-insurance exchange.
  **BANS**
  Points were subtracted if the measure prohibits insurance coverage of abortion in the private insurance market or in the state health-insurance exchange.

- **PUBLIC COVERAGE OF ABORTION**
  Points were added if a state Medicaid program covers abortion care with no restrictions. Points were deducted for restrictions. Points were also deducted if a state prohibits insurance coverage for all or some state and/or municipal employees.
Acknowledgments

The Government Relations department at NARAL Pro-Choice America and NARAL Pro-Choice America Foundation researched and wrote this study. Department staff for the 30th edition of Who Decides? The Status of Reproductive Freedom in the United States includes: Government Relations Director Kate Ryan, Deputy Government Relations Director Stephanie Yost, Senior Counsel for State Legislative Affairs Jael Humphrey, State Legislative Affairs Counsel Meghan McGuirk, Senior Policy Counsel Christina Krysin, Policy Research Associate Kelly Matthews, and Policy Aide Joe Tusha with assistance from Kristin Ford, Ally Boguhn, Ryan Stitzlein, Ryan Marsan, Vanessa Rijo, and Sofia Gonzalez. We also acknowledge the 30 years of work at NARAL that this publication builds upon.

President Ilyse Hogue, along with the boards of directors at NARAL Pro-Choice America and NARAL Pro-Choice America Foundation, provided support and encouragement. Our state affiliates and chapters provided valuable information. Countless others, particularly in state Medicaid offices and state legislatures across the country, patiently answered requests for information. We also appreciate the fine work of our graphic designer, Dawn Kussman Designs, and our printer, Mount Vernon Printing.

Disclaimer

Who Decides? The Status of Reproductive Freedom 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.

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Who We Are

For more than 50 years, NARAL Pro-Choice America has led the fight for reproductive freedom for every body, including the right to access abortion.

NARAL is powered by our more than 2.5 million members from every state and congressional district in the country. We represent the 7 in 10 Americans who believe every person should have the freedom to make the best decision for themselves about if, when, and how to raise a family.

We are the oldest and largest national membership organization primarily focused on advocating for abortion access.