POLITICS & POLICY

Abortion Coverage Looks Like the Most Bitter Pill For Some in Prescription for Health-Care Reform

By Rochelle Sharpe

Staff Reporter of THE WALL STREET JOURNAL

WASHINGTON — Getting health-care reform through Congress will be tough enough by itself, but toss in another controversy and the mixture could be lethal.

Especially if the issue is abortion.

President Clinton is expected to include abortion in his plan's basic benefits package, a move that already has lobbyists on both sides of the issue and members of Congress preparing for a fight. The proposal could turn the health-care debate into a high-stakes battle that determines whether private insurance will pay for the bulk of 1.6 million abortions performed in the U.S. each year.

Including abortion in a universal health plan would provide coverage for abortions for poor women that, by law, now can't be paid for with federal funds. But it also would risk losing the support of the Roman Catholic Church, a longtime advocate of health-care reform. Excluding abortion would eliminate coverage for millions of women who now have it and raise huge problems for Mr. Clinton, who campaigned as a strong abortion-rights advocate. "I don't think Bill Clinton wants to end his first year in office making abortion less available to American women," says William Hamilton, director of Planned Parenthood's Washington office.

Archbishops to Decide Stance

"This is going to be an enormous sticking point, no matter what else is in the health-care reform package," says Helen Alvare, a director in the Pro-Life Office of the National Conference of Catholic Bishops. Today, U.S. archbishops are to hold a private meeting in Chicago to discuss how to deal with the issue.

The Clinton health-care plan, which the president plans to announce next month, isn't expected to make any direct references to abortion. Instead, the subject will be cloaked in medical terms.

In a section on comprehensive reproductive health services, the plan is expected to offer coverage for all "medically appropriate" procedures. The term "medically appropriate" will be defined as proper treatment for a condition that falls within the standards of professionally accepted medical practice. Such appropriate treatments include abortion.

To abortion opponents, the issue is federal mandates, in other words whether the government can order private companies to pay for abortions and whether tax increases for the health plan can indirectly subsidize abortion. "This is a more direct form of government-forced collaboration than federal funding. This would cover the entire population. You wouldn't be able to

Footing the Bill

Reported public expenditures for abortions, in thousands of dollars, and number of publicly funded abortions for fiscal year 1990

a men at at all experienced will fin		FEDERAL \	STATE	TOTAL
ELECTIVE ABORTIONS	NUMBER	4	162,217	162,221
(paid for in 13 states)	EXPENDITURES	\$15	\$65,058	\$65,073
LIFE-SAVING ONLY ABORTIONS	NUMBER	161	201	362
(paid for in 30 states and D.C.)1	EXPENDITURES	\$104	\$122	\$226
OTHER ABORTIONS	NUMBER	11	199	210
(paid for in 7 states) ²	EXPENDITURES	\$7	\$122	\$129

Required to save the life of the mother

2Required because of such reasons as tetal deformity, rape or incest

Source: Alan Guttmacher Institute

escape it," says Douglas Johnson, lobbyist for the National Right to Life Committee.

Advocates for abortion rights view the issue as part of the continuing struggle over women's access to the operation. If the government health plan excludes abortion, "millions of women who currently have insurance coverage of reproductive health, including abortion, will have it taken away," says James Wagoner, political director of the National Abortion Rights Action League. Unless abortion is included as a standard benefit, only women who pay for supplemental insurance could have their operations paid for, he says.

While it isn't known how many private health plans currently cover abortions, benefits consultants think most plans pay for the operations. Many insurance carriers say they cover only medically necessary abortions, but they rarely try to determine whether an abortion is elective, according to Towers Perrin, a benefits consulting firm. "Whether they're doing it knowingly or unknowingly, most insurance carriers are probably paying for elective abortion," a Towers Perrin spokesman says.

Government employees and most indigent women, however, must pay for elective abortions because of such federal restrictions as the Hyde amendment, which bars the federal government from spending tax dollars on the operations. President Clinton has proposed to eliminate the restriction in his 1994 budget. Meanwhile, only indigent women in 13 states can receive local Medicaid money to pay for their operations.

Including abortion as a benefit might be politically costly, but it would add little

to the plan's financial costs. Towers Perrin recently estimated that if one federal agency added elective abortion to its health plan, the employer's premium would rise just one-tenth of 1%, and a single employee's monthly payroll deduction would increase 18 cents. Family coverage would cost 50 cents a month, the company said. A first-trimester abortion usually costs \$250 to \$300.

Paying for indigent women's abortions would cost the federal government \$63 million to \$115 million, according to estimates from abortion-rights and antiabortion groups. Even the higher estimate would be a minuscule part of an overall health plan, expected to be in the multibil-

But abor cerned with plan. The Ca cated nation

cated nation than two dexpected ab ers met las Clinton aborcare plan.

'Moral Tra

"We bell edy, a seric major politicare reform most Amer government years." Auchairman of Conference, Clinton last the largest and nursing about 40 mil

The heal conscience Catholic ho abortions. church lead off," Ms. Al be included well as hea some lives a

The fina new Congres the abortio members of mighty poli newly electe lawmakers, rights, may In the

believe, the some middle state decide its health abortion rig would really lion-dollar area.

But abortion opponents are more concerned with the moral aspects of the health plan. The Catholic church, which has advocated national health insurance for more than two decades, is disturbed by the expected abortion coverage. Catholic leaders met last month with Hillary Rodham Clinton about the administration's health-care plan.

'Moral Tragedy'

"We believe it would be a moral tragedy, a serious policy misjudgment and a major political mistake to burden health-care reform with abortion coverage that most Americans oppose and the federal government has not funded for the last 17 years," Auxiliary Bishop John H. Ricard, chairman of the United States Catholic Conference, wrote in a letter to Mrs. Clinton last month. The church sponsors the largest network of nonprofit hospitals and nursing homes in the country, serving about 40 million people each-year.

The health plan probably will include a conscience clause, which would allow Catholic hospitals to refuse to perform abortions. But that wouldn't appease church leaders. "We can't trade things off," Ms. Alvare says. "Killing is going to be included in a basic benefits package, as well as healing. We can't accept saving some lives and giving up others."

The final decision will be made by a new Congress that is virtually untested on the abortion issue. While antiabortion members of Congress were feared as a mighty political force in the past, the newly elected class of female Democratic lawmakers, all of whom support abortion rights, may be able to offset their power.

In the end, some political analysts believe, the lawmakers may search for some middle ground. They may let each state decide whether to include abortion in its health plan, a compromise neither abortion rights advocates nor opponents would really like.