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**Planned Parenthood Empire State Acts****Testimony of Planned Parenthood Empire State Acts  
Submitted to Joint Legislative Budget Hearing on Health and Medicaid  
February 11, 2025**

Planned Parenthood Empire State Acts (PPESA) values the opportunity to submit testimony on the proposed FY2026 Executive Budget. PPESA proudly represents the five Planned Parenthood affiliates who provide primary and preventive sexual and reproductive health care services to more than 200,000 individuals each year.

We enter 2025 in a deeply precarious position. We face a Congress and federal administration known to be hostile to reproductive freedom while living in a post-Roe world where bodily autonomy is no longer a protected right. Emboldened by the *Dobbs* decision, anti-abortion activists are advancing policies to significantly restrict access to abortion and sexual and reproductive health care across the country. Pregnant people are dying after being denied lifesaving miscarriage management care. Transphobic rhetoric and gender-affirming care bans are threatening the health of transgender and non-binary people. Patients seeking this sensitive and private health care are now forced to travel hundreds of miles, expend unreasonable and often hard to access resources, to make the best health care decisions for themselves. For some, the burdens posed by bans and restrictions are too great to overcome, and they have no choice in determining their own futures.

The threats against reproductive freedom are set against a backdrop of an already struggling health care system. Long standing under investment in sexual and reproductive health care, combined with soaring costs, workforce shortages, and the impact of abortion bans and restrictions are limiting access everywhere, even in access states like New York.

This stark reality is not just a crisis of the moment, but for years to come. New York must continue to be a leader in the fight for reproductive freedom for all by relentlessly pursuing bold policy actions to protect and expand access, and meaningful financial investments in the sexual and reproductive health care delivery system to ensure care is truly available to anyone seeking it.

It is through that framework that we urge the Legislature and Executive to center the following investments in the FY26 enacted budget:

- **\$20M in New Grant Funding to Support the Provision of Medication Abortion and Care Later in Pregnancy.** We deeply appreciate the Executive Budget's inclusion of \$20M in new grant funding to support the provision of medication abortion and care later in pregnancy. Medication abortion is a growing percentage of the abortion care provided in New York, and across the country. For the 5 Parenthood affiliates in

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New York, it is over 60% of the abortion care they provide, for 4 out of the 5, it is over 70%. Yet reimbursement for MedAB is unacceptably low, resulting in providers losing hundreds of dollars every time they deliver this essential care. This is also the case for providers of care later in pregnancy, where the cost of that care far exceeds the reimbursement rate of \$1,300. Such a significant under investment in both services directly impact access and the ability of providers to sustainably offer this critical care. We respectfully request that this funding is included in the enacted budget.

- **\$15M in Capital and Security Funding.** We were also grateful to see in the Executive Budget the inclusion of \$15M to support a re-envisioned funding stream - the Reproductive Health Care Improvement Program - for providers to shore up not only the security of their health centers but also make important infrastructure improvements. Since the *Dobbs* decision, the budget has included \$10M in funding annually to address the security needs of abortion providers. In reality, this funding has not reached providers in an effective way. Moreover, while security remains a key concern for providers, there is also great need for additional capital investment to ensure that providers can renovate and expand health centers to meet patient needs and for debt retirement. This reimagined funding stream is vital, and we respectfully request that it is included in the enacted budget.
- **\$35M in Funding for the Reproductive Freedom and Equity Program (an additional \$10M investment).** In 2022, Governor Hochul made a historic investment in new funding streams that invested in abortion access, including \$25M in grant funding for abortion care. While this funding was intended to expand abortion care, for many providers it was desperately needed funding to retain the existing abortion access points that were faltering under decades of under investment in this critical service. As the cost of care continues to rise, need for care grows, and the threats posed by the Trump Administration intensify, we anticipate the providers and abortion funds supported by this program will need additional assistance to provide care and support to all who need it. Therefore, we respectfully request that the funding for this program be increased by \$10M, which would result in the program growing to \$35M for distribution to abortion providers and funds.
- **Renewal of the Legislature's \$1M Appropriation for the Family Planning Grant.** This funding will maintain the grant at the FY25 level and is essential to facilitating access to primary preventative and reproductive health care services, such as affordable birth control, testing and treatment for sexually transmitted diseases and counseling related to reproductive health for low-income New Yorkers. Funding for this program has failed to keep up with rising costs of care and reflects the comprehensive range of services patients need when seeking care from a sexual and

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reproductive health care provider. Moreover, during the last Trump Administration, implementation of the "domestic gag rule" rule forced the New York State Department of Health to exit the Title X program. We anticipate this will once again occur. Given that federal funding for this program is at risk, we must at minimum ensure stable state funding and prepare to respond in the coming years to any loss of federal funds. We urge the legislature to renew their annual \$1M appropriation for the grant.

We also request that the Legislature and Governor include the following policy proposals in the FY26 Enacted Budget:

- **End Abortion Surveillance and Reform Pregnancy Loss Reporting.** New York mandates individual reporting of abortion care, which is archaic and raises significant privacy concerns for individuals receiving abortion care in New York. With an incoming federal administration poised to weaponize abortion data, we must act in this budget to modernize our laws to protect New Yorkers and those seeking care in New York. We respectfully request that the Enacted Budget contain S.3173 Hinchey/A.4023 Paulin, which eliminates the requirement to report patient identifying abortion data to state and local governments.
- **Codify EMTALA Protections in New York State Law.** Ongoing litigation and a hostile federal administration threaten the federal guidance that requires hospitals to provide emergency abortion care when it is necessary to stabilize a pregnant patient's health. Without these protections in state law, pregnant people who seek care for emergency medical conditions can be denied this life saving care. We are asking that the enacted budget include A.1165 Paulin/S.2165 May, which would require general hospitals to provide emergency care, including abortion, to all who need it.
- **Enact Hospital Transparency.** Less than two weeks into the Trump administration, the federal government has already begun to coerce hospitals into denying gender-affirming care and promised to give cover to those who would withhold reproductive health care. In this moment, when access to abortion and gender-affirming care is being eviscerated nationwide, it is more important than ever that patients have the tools to find out whether the hospital in their area provides the care they need and to lay the foundation to address health care deserts in our state. Unfortunately, at the end of the year, the Governor vetoed legislation that would have advanced transparency and access to time-sensitive health care here in New York. Because she cited cost in her veto message, we respectfully request that S.3486 Hinchey/A.3862 Rozic be included in the enacted budget.

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