

House Health & Insurance  
 05/26/2021 01:30 PM  
 SB21-009 Reproductive Health Care Program  
 Typed Text of Testimony Submitted

Name, Position, Representing	Typed Text of Testimony
<p>Isabel Cruz            For            Colorado Consumer Health Initiative</p>	<p>My name is Isabel Cruz and I am the Policy Manager for the Colorado Consumer Health Initiative, a nonprofit, nonpartisan, membership-based organization that works to ensure all Coloradans have equitable access to quality and affordable health care.</p> <p>We writing in support of SB21-009 because providing access to contraceptives for undocumented people can reduce existing inequities throughout economic and health systems.</p> <p>Contraceptive access is crucial to managing one’s health and reproductive goals, but multiple intersecting policy and systemic factors prevent undocumented people from obtaining contraceptive coverage. Rules that prohibit enrollment based on legal status and high out-of-pocket costs leave many undocumented people without reproductive health care and limit their ability to benefit from preventive services that let them decide the size and timing of their families.</p> <p>The ability to decide whether and when to become a parent is critical to economic security. Systemic barriers to reproductive health care are a main driver for the unintended pregnancy rate of Latinx populations being double the rate of white populations. Unintended pregnancy increases risk for poor maternal and infant outcomes which drive up health care costs for families and the health care system alike. For many families facing economic insecurity, an unintended pregnancy can upend their financial stability, making it more difficult for families to pursue education or maintain employment.</p> <p>No person should be denied health care or reproductive autonomy because of immigration status. Access to contraception allows people to plan for their pregnancies and improves health outcomes, family stability, and allows families to empower themselves economically. Being able to pick up more birth control refills at one pharmacy visit can enhance a patient’s medication continuity and increase opportunities to access medications by mitigating systemic obstacles like transportation issues or work obligations.</p> <p>SB21-009 safeguards the economic and health security of undocumented families by giving them power to decide their own family size and agency over their financial future. CCHI believes that expanding access and ease to contraceptive services is a step towards health equity for those historically left out of the health care system.</p>

	I respectfully urge your yes vote on SB 009 today. Thank you for your consideration.
--	--



**POSITIVE WOMEN'S NETWORK**  
USA

Positive Women's Network - USA  
436 14<sup>th</sup> Street, Suite 500  
Oakland, CA 94612  
510.681.1169 **phone**  
[www.pwn-usa.org](http://www.pwn-usa.org)  
@uspwn  
[www.facebook.com/pwnusa](https://www.facebook.com/pwnusa)

March 17, 2021

To Whom It May Concern:

Positive Women's Network – USA (PWN), the premiere national network of women and people of trans experience living with HIV, would like to join Senator Jacquez-Lewis and Representative Caraveo calling for the creation of the Colorado Reproductive Health Care program that would provide contraceptive methods and counseling services to eligible individuals regardless of their citizenship or immigration status.

We stand in support of this legislation. Everyone should have access to health care, bodily autonomy and self-determination. Reproductive choices must not be limited based on a person's immigration status. Undocumented immigrants face barriers to this care; many are blocked by policies from accessing affordable healthcare. Latinx immigrants often work in industries that do not offer health care coverage, and private insurance is often financially out of reach for them. The statistics clearly show the effects of these barriers: 38% of Latinas are uninsured, 25% of Latinas live in poverty, and 50% of Latina pregnancies are unintended. The barriers for youth are even more detrimental: Latina youth experience pregnancy at twice the average rate of their white counterparts.

Creating a Reproductive Health Care Program will ensure that any Coloradan of reproductive capacity -- regardless of gender, citizenship or immigration status -- is eligible to enroll in this program, receiving medical care and up to a one-year supply of contraceptive regimens.

PWN sees our intersectionality in support of this bill in several ways. As an organization, we support reproductive choice for all Coloradans as an economic justice issue, as a gender justice issue, and as a reproductive choice issue. Looking beyond the four-million dollar fiscal note attached to this bill, we believe that there will be both economic and social justice gains.

We know that immigration status impacts people of diverse racial backgrounds. However, there are compelling statistics that illustrate the importance of connecting all immigrants, regardless of whether they are living with HIV, to reproductive health care. HIV has directly impacted our Latinx and immigrant communities since the beginning of the epidemic. In the first 3 quarters of 2020, 83 Latinx/Hispanic people were diagnosed with HIV, which represents 36% of the 233 new diagnosis that year.

We urge all members of the Colorado legislature to support this bill.

## **CIRC Testimony in Support of SB21-009**

We are testifying in support of SB21-009, expanding critical access to reproductive rights for all Coloradans.

The Colorado Immigrant Rights Coalition (CIRC) is a statewide, membership-based coalition of immigrant, faith, labor, youth, community, business and ally organizations founded in 2002 to improve the lives of immigrants and refugees by making Colorado a more welcoming, immigrant-friendly state.

Every person deserves to be able to have the ability to plan their futures and parenthood. Currently, access to reproductive rights, and therefore this fundamental right, is not equal in Colorado across race, economic status, and immigration status. For far too many people, there is no meaningful access to affordable contraception which exacerbates the health inequities that already exist for immigrants and communities of color.

Under current, exclusionary, and racist healthcare policies, undocumented women, women of color, and low-income women are not getting access to the full health care and contraception they need. This has profoundly negative health outcomes and denies people the same right to agency, to bodily autonomy, and to personal decision making when it comes to getting the services and support to prevent a pregnancy, terminate a pregnancy, or to have a healthy pregnancy.

SB21-009 is an important step forward to undo healthcare policies that harm and exclude our communities. By proactively expanding access to contraception for undocumented Coloradans and reducing barriers to access for individuals already on Medicaid, this bill sets the foundation for a Colorado where everyone can choose whether or not to be a parent. By passing this legislation, we can begin to create healthcare policies that are inclusive and centered on the human dignity of every person and their right to choose and control their futures.

Thank you for your time. We urge a YES vote on SB21-009.

Raquel Lane-Arellano

Colorado Immigrant Rights Coalition

2525 W. Alameda Ave.

Denver, CO



**Elizabeth G. Taylor**  
Executive Director

**Board of Directors**

**Ann Kappler**  
Chair  
Prudential Financial, Inc.

**William B. Schultz**  
Vice Chair  
Zuckerman Spaeder LLP

**Miriam Harmatz**  
Secretary  
Florida Health Justice Project

**Nick Smirensky, CFA**  
Treasurer  
New York State Health Foundation

**L.D. Britt, MD, MPH**  
Eastern Virginia Medical School

**Ian Heath Gershengorn**  
Jenner & Block

**John R. Hellow**  
Hooper, Lundy & Bookman, PC (Ret.)

**Michele Johnson**  
Tennessee Justice Center

**Arian M. June**  
Debevoise & Plimpton LLP

**Jane Preyer**  
Environmental Defense Fund (Ret.)

**Lourdes A. Rivera**  
Center for Reproductive Rights

**Donald B. Verrilli, Jr.**  
Munger, Tolles & Olson

**Ronald L. Wisor, Jr.**  
Hogan Lovells

**Senior Advisor to the Board**  
**Rep. Henry A. Waxman**  
Waxman Strategies

**General Counsel**  
**Marc Fleischaker**  
Arent Fox, LLP

May 26, 2021

House Health & Insurance Committee  
Colorado General Assembly  
200 E Colfax Avenue  
Denver, CO 80203

**RE: Hearing Item SB21-009 Reproductive Health Care Program**

To Whom It May Concern:

The National Health Law Program (NHeLP) appreciates the opportunity to submit this letter in strong support of SB21-009. NHeLP is a public interest law firm that protects and expands the health care rights of low-income individuals and underserved populations throughout the country. For over 50 years, NHeLP has advocated and litigated to advance health care access nationwide, and has worked collaboratively with state and local advocates on issues involving immigrants' access to health care and reproductive justice.

NHeLP believes that all individuals, regardless of immigration status, are entitled to comprehensive and quality reproductive health care, delivered with dignity, and where cost is never a barrier. NHeLP urges the Colorado legislature to vote in favor of SB21-009 for the reasons discussed below.

**1. SB21-009 Emphasizes the Crucial Role of Contraceptive Care**

Contraceptive care is a vital health care service that allows people to make decisions about their sexual and reproductive health, and improves health and economic outcomes for

individuals and their families. NHeLP supports policies that promote contraceptive equity, meaning every person can make their own decisions about pregnancy prevention, and ensure contraceptive care easily is accessible and covered at no cost in all health programs.<sup>1</sup>

Immigrants are more likely to experience unintended pregnancies, but are less likely to receive information about family planning or have access to contraceptive care.<sup>2</sup> SB21-009 addresses this unmet need and takes steps toward contraceptive equity by expanding contraceptive coverage under Medicaid to include previously ineligible immigrants.

## 2. SB21-009 Reduces Immigrants' Barriers to Health Care Coverage

Immigration status should not determine health outcomes, yet both lawfully present and undocumented immigrant populations face barriers to health care coverage. Under current federal health and immigration policies, lawfully present immigrants are barred from Medicaid for five years, and undocumented immigrants are ineligible for full-scope Medicaid and unable to purchase private health insurance through the ACA marketplaces.<sup>3</sup> Approximately 45% of undocumented and 23% of lawfully-present immigrants in this country are uninsured, compared to 9% of citizens.<sup>4</sup> This denial of coverage forces immigrant individuals and communities to go without necessary care.

SB21-009 would ensure that immigration status is not a barrier to contraceptive access. Using state funds to provide contraceptive coverage for all immigrants is an important first step in reducing the health care coverage gap for immigrant communities in Colorado.

---

<sup>1</sup> *Contraceptive Equity*, Nat'l Health Law Program, <https://healthlaw.org/contraceptive-equity/> (last visited March 17, 2021).

<sup>2</sup> Kinsey Hasstedt, Sheila Desai, and Zohra Ansari-Thomas, *Immigrant Women's Access to Sexual and Reproductive Health Coverage and Care in the United States*, The Commonwealth Fund, (Nov. 20, 2018), <https://www.commonwealthfund.org/publications/issue-briefs/2018/nov/immigrant-womens-access-sexual-reproductive-health-coverage>.

<sup>3</sup> See 42 U.S.C. § 1320b-7(d); 42 U.S.C. § 1396a(b)(3).

<sup>4</sup> *Health Coverage of Immigrants*, Kaiser Family Foundation, (Mar. 18, 2020), <https://www.kff.org/racial-equity-and-health-policy/fact-sheet/health-coverage-of-immigrants/>.



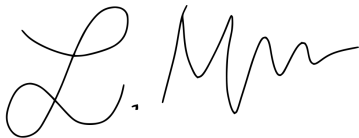
### 3. SB21-009's Extended Supply of Contraceptives Increases the Likelihood of Continued Use for Medicaid Enrollees

Providing a full year's supply of contraception (or enough for 13 cycles) at one time is a best practice recommended by federal health experts and the American College of Obstetricians and Gynecologists.<sup>5</sup> Because many contraception users are unable to obtain monthly refills in a timely manner, data show that this policy is cost effective and improves both adherence and continuation rates.<sup>6</sup> By adopting this practice in Medicaid, SB21-009 increases the likelihood of continued contraceptive use for those enrollees.

#### Conclusion

Thank you for the opportunity to provide input on this vital legislation. If you have any questions regarding this letter or NHeLP's support of SB21-009, please contact me at [mccaman@healthlaw.org](mailto:mccaman@healthlaw.org).

Sincerely,



Liz McCaman  
Senior Attorney

---

<sup>5</sup> *Providing Quality Family Planning Services*, CDC and the US Office of Population Affairs, at 11 (Apr. 25, 2014), [https://opa.hhs.gov/sites/default/files/2020-10/providing-quality-family-planning-services-2014\\_1.pdf](https://opa.hhs.gov/sites/default/files/2020-10/providing-quality-family-planning-services-2014_1.pdf); Am. College of Obstetricians and Gynecologists, *Access to Contraception*, Committee Opinion Number 615, at 2-3 (Jan 2015), <https://www.acog.org/-/media/project/acog/acogorg/clinical/files/committee-opinion/articles/2015/01/access-to-contraception.pdf>.

<sup>6</sup> Diana Greene Foster et al., Number of oral contraceptive pill packages dispensed, method continuation, and costs, 108 *OBSTETRICS & GYNECOLOGY* 1107-14 (Nov. 2006), doi: 10.1097/01.AOG.0000239122.98508.39.



## **Testimony in Strong Support of SB21-009: Reproductive Health Care Program**

My name is Emily Scott Robinson and I am a former social worker and victim's advocate. I have worked with immigrant women and families in rural areas around Colorado for the Adelante program in the San Luis Valley, and for the San Miguel Resource Center serving Telluride and the Western Slope. I'm writing to express my strong support for SB21-009, which would expand contraceptive coverage to undocumented immigrant women in our state, helping prevent unplanned pregnancies, and creating better health outcomes for women and their families.

I strongly support this bill because I worked directly with immigrant women who were survivors of domestic violence and sexual assault. They were often single mothers working hard to provide for their children. An unplanned pregnancy could make a devastating difference in the life of a woman trying to leave her abusive partner. Having another child means another mouth to feed and more bills to pay— just another barrier to leaving an abuser.

One form of abuse that I witnessed in my work is Reproductive Coercion. The WHO defines reproductive coercion as “*behaviors that interfere with contraceptive use and/or pregnancy*” and can include attempts to make a woman pregnant against her wishes, coercing a partner to have unprotected sex, and interfering with contraceptive methods. For this reason alone, we should make it easier for immigrant women to access contraceptives— they deserve to have bodily autonomy and to make informed decisions about their reproductive health without coercion or abuse.

This bill is an obvious “yes” to anyone who cares about the health of women and families in Colorado. It's also an obvious “yes” from an economic standpoint. From 2014-2016, I worked as a Spanish interpreter for a public hospital in Tennessee in their OB/GYN clinic. I saw clearly the impact of unplanned pregnancies on the medical system in a state that refused to provide contraceptives to undocumented women. Ironically and quite regressively, Tennessee's Medicaid program covered pregnancy care, labor and delivery for undocumented immigrants, which cost the state tens of thousands of dollars per child born. However, Tennessee refused to provide contraceptives to undocumented immigrants, which would have cost the state taxpayers far less money and given women the reproductive health care they deserved and badly needed.

Lastly, this bill would allow women to get a one-year prescription for contraceptives, which is a particularly vital provision for our rural immigrant communities who already face serious barriers to medical care in the form of language differences, transportation, and cost.

Thank you for your time and consideration. I sincerely hope that lawmakers will take swift action in advancing this bill to improve the lives and health of women and families

in Colorado. From a person who has worked in the trenches of healthcare and social work, I can tell you that this bill is a no-brainer.

Thank you!

# Colorado Chapter

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



## Statement in Support of SB21-009: Reproductive Health Care Program

On behalf of our nearly 800 members, the American Academy of Pediatrics, Colorado Chapter, writes in support of SB21-009.

As pediatricians and pediatric professionals, we know that access to contraception is key to supporting healthy adolescents, adults, and families. Unfortunately, we know that for undocumented adolescents and adults, comprehensive sexual health care can be prohibitively expensive. SB21-009 would expand Medicaid funding to cover contraception in this vulnerable and important population in Colorado.

Access to sexual health care and counseling is important for all adolescents. The American Academy of Pediatrics believes in policies supporting comprehensive sexual health care for teens, in a way that respects their consent to treatment and confidentiality.<sup>1</sup> The United States continues to have the highest adolescent pregnancy and birth rates among developed countries with available data (57 per 1,000 15- to 19-year-olds).<sup>2,3</sup> Therefore, providing comprehensive sexual health information and access to contraception to all adolescents is vital.<sup>1,2</sup>

In addition to caring for adolescents, pediatricians and pediatric professionals feel strongly about access to contraceptive care for adults. Unintended pregnancies are linked with higher rates of pre- and postnatal complications for the mother and child.<sup>4</sup> Some complications include higher rates of preterm delivery, higher rates of low birth weight babies, higher rates of maternal postpartum depression after delivery, and poor mental and physical functioning of the infant in early childhood.<sup>4</sup> These complications can impact the health of the baby, mother and other children in the home and have high fiscal costs; unintended pregnancies cost Colorado Medicaid more than \$160 million annually.<sup>5</sup> Reducing unintended pregnancy by expanding access to contraception has been found to reduce expenditures in health care, food stamps, temporary aid, and other programs.<sup>5</sup>

Planned pregnancies help create financially strong and secure families and healthy parents and children. Increasing access to comprehensive sexual health care for undocumented residents of Colorado will have a positive impact on the health of families and communities and reduce financial burdens on the state.

**SB21-009 will improve access to contraceptive care to undocumented Coloradans.** In doing so, more adolescents and adults in Colorado will have access to vital, comprehensive, sexual health care, thus reducing and unplanned pregnancies and improving the health of our communities.

### Sources:

<sup>1</sup> The American Academy of Pediatrics, Committee on Adolescence. "Contraception for Adolescents." *Pediatrics*. October 2014, 134 (4) e1244-e1256; DOI: <https://doi.org/10.1542/peds.2014-2299>

<sup>2</sup> The American College of Obstetricians and Gynecologists, Committee on Adolescent Health Care. "Adolescent Pregnancy, Contraception, and Sexual Activity." Committee Opinion, No. 699. May 2017. Available at <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2017/05/adolescent-pregnancy-contraception-and-sexual-activity>

<sup>3</sup> G Sedgh, LB Finer, A Bankole, MA Eilers, S Singh. "Adolescent pregnancy, birth, and abortion rates across countries: levels and recent trends." *Journal of Adolescent Health*. February 2015. 56(2) 223-230 DOI: <https://doi.org/10.1016/j.jadohealth.2014.09.007>

<sup>4</sup> Colorado 2018 Sexually Transmitted Infections Annual Report. Colorado Department of Public Health and Environment, Denver, CO. February 2020.

<sup>5</sup> Association of State and Territorial Health Officials. "Colorado significantly decreases unintended pregnancies by expanding contraceptive access." 2017. Available at: <https://www.astho.org/Programs/Maternal-and-Child-Health/Documents/Colorado-Significantly-Decreases-Unintended-Pregnancies-by-Expanding-Contraceptive-Access/>

## **Soul 2 Soul Sisters & Let My People Vote Testimony | Reproductive Health Care Program (SB21- 009)**

**Contact information: Victoria Dadet – [victoria@neweracolorado.org](mailto:victoria@neweracolorado.org) / Briana Simmons – [briana@soul2soulsisters.org](mailto:briana@soul2soulsisters.org)**

We are submitting this statement on behalf of Soul 2 Soul Sisters, a Denver-based organization that organizes for Black womxn's healing, joy, and liberation. Soul 2 Soul Sisters and our electoral justice program, Let My People Vote, urges you to support Senate Bill 9 and expand access to reproductive healthcare for undocumented communities.

Access to contraceptives are essential for securing reproductive justice for our communities, yet birth control is consistently out of reach for the people who need it most. More than 300,000 women in Colorado live in contraceptive deserts, and 10,000 women live in counties without health centers that offer the full range of family planning methods.

For these communities, getting contraception comes with barriers like having to take time off work, finding childcare, and securing transportation to comprehensive health centers. Combining these barriers with the ways the COVID-19 pandemic is exposing the failures of our healthcare system, **it's clear that we need to be expanding access to healthcare services for everyone, especially undocumented communities.**

In 2016, undocumented people made up 3% of Colorado's population and 34% of immigrants. For Black undocumented communities, accessing healthcare can come with extra burdens from having to navigate institutionalized anti-Black racism in addition to fears of state violence, family separations, and deportation. **The impact of slavery and colonialism are being felt in reproductive healthcare disparities, and we need to be centering the communities that are being impacted the most to ensure that we are all able to get the health care we need, when we need it, without any hassle.** By expanding access to contraceptives for undocumented communities, we can take a necessary step towards securing bodily autonomy – something that is crucial for Black Womxn who have been fighting for agency and autonomy over our bodies and lives in the United States for centuries.

Our communities need the full range of reproductive healthcare services to live safe and healthy lives, and we urge you to support Senate Bill 9 for the health, safety, and dignity of undocumented Black communities. Thank you for your time.

Senator Rhonda Fields and Senator Joann Ginal  
Senate Health and Human Services

Margaret E. Picard, PsyD  
Licensed Psychologist/Bilingual Infant Mental Health Clinician  
303-300-6193

March 22, 2021

In support of SB21-009: Reproductive Health Care Program

My name is Dr. Margaret E. Picard and I am an infant mental health psychologist in Metro Denver. As a psychologist, I provide mental health services to pregnant and parenting families and their children ages birth to five years old, and I strongly support SB21-009.

Every family should have the opportunities and resources, physical and emotional, to plan their family intentionally. I have seen the consequences of unplanned and unwanted pregnancies on parents' mental health, which can contribute to low birthweight, preterm birth, maternal health risk behaviors, and depression. Other negative consequences include poorer social-emotional development in children, PTSD, and relational conflict that can lead to interpersonal violence. There can be increased risk for child abuse and domestic violence when a pregnancy is unintended and unwanted.

I have been honored to bear witness to remarkable resilience, courage, dedication, and love of children in immigrant families. By providing access to contraception for those who may not otherwise have such access, due to high cost and barriers related to immigration status, we could greatly improve outcomes for parents and children. Providing this access would also decrease the opportunity for power/control used against immigrant women in interpersonally violent situations. Setting families up for success has significant long-term benefits on children's health and well-being into adulthood. This results in a healthier, happier population and also has been proven to have significant and widespread economic advantages.

Reproductive justice is also personal to me. As a mother, I know how challenging parenting can be even when children are planned and wanted. Feeling empowered to have choices regarding one's family planning and body, and the resources and access to support these choices, is essential. By expanding contraceptive options for eligible people, you're not just providing crucial medical care, you're also supporting the future wellbeing of thousands of mixed status families across Colorado. I urge the committee to pass SB21-009. Thank you.

Sincerely,

Dr. Margaret E. Picard



**INTERFAITH ALLIANCE**  
OF COLORADO  
PROTECTING FAITH AND FREEDOM

Good afternoon Madam Chair and Members of the Committee,

My name is Sam Carwyn, and I am the Educator & Advocate at the Interfaith Alliance of Colorado. Before joining Interfaith, I worked for three years in a program focused on addressing unintended pregnancy. I partnered with churches and social services organizations to increase access to contraception. I educated individuals, so they knew their contraception options. Additionally, I am in seminary working towards a Master's in Divinity. My concentration is in social transformation as I strive to be a faith leader working to improve the community in which I live.

Throughout the many diverse and varied faith traditions that we represent, most faith traditions address the sanctity of the human body in their foundational and sacred texts. We believe in one's right to make decisions about what is best for their bodies. Across our many differences, many of us have come together in our belief that an individual has the right to choose if and when to parent based on their faith, financial means, support systems, and resources. This is a choice when the services and support to prevent pregnancy, terminate a pregnancy or have a healthy pregnancy are accessible. Presently, our undocumented neighbors, essential workers, students, etc., do not have the same choices as other Coloradans because they are not able to utilize essential public health programs. This barrier to access is a barrier to justice. When you factor in the additional barriers to accessing care having consistent care, the choices continue to diminish for our undocumented communities.

If passed, this bill would provide individuals with greater access, countering the systematic barriers that persist in our community. Individuals live in areas with little or no access to reproductive care and need publicly funded contraception. At this time, contraception is only provided for a few months at a time, so an individual must return to a healthcare facility multiple times to prevent pregnancy for an entire year. This means an individual will need to arrange time off work, more childcare, and pay additional travel expenses every few months. Because barriers to access are in place, unintended pregnancy is increased, and those who live in rural communities and who have a middle to low income are further marginalized. This bill is an opportunity to focus on addressing the economic and racial inequities pervasive in our society that lead to a lapse in care. Extending access to a year's supply for undocumented folks- to be in line with the affordable care act, will increase follow-through as the barriers to getting care will be reduced.

This bill helps reduce undocumented individuals' adverse health outcomes and ultimately saves our health care system money down the line. Increasing access to contraception is crucial for improving health and financial stability and shows respect for our state's people. When individuals can use contraception as a family planning method, they can obtain their education,



**INTERFAITH ALLIANCE**  
OF COLORADO  
PROTECTING FAITH AND FREEDOM

financial, employment, and family-building goals. This bill demonstrates concern for undocumented immigrants who need reproductive healthcare and considers the additional hurdles individuals must overcome. It invests in prevention as it is the best way to help individuals live more stable lives and reduce the broader community's financial burden. Lastly, it centers on justice and equity in our Colorado State Statutes.

For all of these reasons, on behalf of the Interfaith Alliance of Colorado, I urge you to vote YES on B 21-009. Thank you for your time and consideration.



TO: House Health and Insurance Committee

FR: New Era Colorado

RE: Support for Senate Bill 9, Reproductive Health Care Program

Thank you committee members for taking the time to read this today.

My name is Arianna Morales and I'm the Regional Advocacy Manager for New Era Colorado, testifying in support of Senate Bill 9. As an organization, our mission is to engage and mobilize a new generation to participate in democracy. Through our student-led campus organizing work, The Brazen Project, we have engaged thousands of students on college campuses across Colorado to destigmatize abortion and we know that young people overwhelmingly support increasing access to reproductive healthcare services.

Currently, young people enrolled in Medicaid are only limited to a 3 to 6 month supply of contraception which is an issue because we know often these folks are students, juggling multiple jobs, and/or without consistent transportation. Oftentimes, needing to find room to meet with a physician or pharmacist means needing to make hard decisions like asking for time off work and missing pay that was meant to go towards gas, groceries or rent for the month or skipping a class, leaving you behind on school work. These barriers are exacerbated for undocumented young people who currently have limited access to insurance and reproductive healthcare services. The right to access contraceptives is not only essential to lead a healthy sexual and reproductive life but it's a basic necessity in having the freedom and power to plan out your own future.

Throughout the years, through our work, we've found that young people strongly value independence and the freedom for all people to be able to define their own path in life above all else, which includes deciding when/if to become parents. A recent study found that providing folks with a year's supply of oral contraceptives decreased unintended pregnancy by 30% (Kaiser Family Foundation, 2019). This bill would make it feasible for young people juggling their busy schedule and basic life responsibilities to be able to access contraception for a year without needing to make consistent sacrifices to access basic healthcare. Above all else, this bill would provide access and agency to communities who are currently being denied the fundamental right to make decisions about their future.

It is clear that access to contraception is fundamental to being able to choose your path in life and shouldn't be denied on the basis of immigration status or riddled with systemic barriers in the process of accessing them. This bill is a clear next step for Colorado in providing fair and accessible healthcare services to all people to empower folks to lead healthy and autonomous lives. New Era Colorado and the young people we serve and organize with are adamant that having full bodily autonomy is a right not a privilege, which is why we support Senate Bill 9 and strongly urge you to do the same. Thank you for your time.

Arianna Morales  
Regional Advocacy Manager  
[arianna@neweracolorado.org](mailto:arianna@neweracolorado.org)  
303-416-0744

# JANE'S DUE PROCESS

teens. reproductive rights. texas

March 16, 2020

To Whom It May Concern:

I am writing on behalf of Jane's Due Process to express our strong support for SB 9, which will allow undocumented people to exercise control over their own reproductive health care by expanding the contraceptive services available through Medicaid.

Jane's Due Process is a nonprofit organization that helps teens in Texas confidentially access sexual and reproductive health services, including birth control and abortion. Through our confidential textline and hotline, we help teens navigate the difficult and often confusing barriers to accessing contraceptive care.

Immigrant youth are disproportionately affected by laws that restrict access to essential reproductive health services. We work with immigrant teens, who often arrive in the United States with no financial support and need help accessing legal services, health care, housing, education, and other critical social services. Immigrants experience unintended pregnancies at much higher rates than people born in the U.S.; however, immigrant women are much less likely to receive contraceptive services or information. This bill would help to address these issues by expanding Medicaid to include contraceptives for undocumented people and by requiring the coverage of a one-year supply of oral contraceptives.

By expanding access to contraception, this legislation would help to address the obstacles that undocumented people face in getting the services they need in order to be able to exercise their right to bodily autonomy and plan for their families and their future. Women who receive a year's supply of oral contraceptives are 30% less likely to experience an unintended pregnancy than those who receive a one-month or three-month supply at a time by eliminating systemic obstacles such as juggling transportation, work, and childcare. Additionally, a year's supply of contraception will help those who live in rural communities or contraceptive deserts.

SB 9 will help to reduce disparities in reproductive health care among immigrants and promote reproductive equity. Ensuring the availability of contraception regardless of immigration status and providing a full year's supply will advance the health and dignity of undocumented people.

For the foregoing reasons, and in the interest of racial and reproductive justice, we strongly support SB 9 and the expansion of contraceptive services for undocumented people.

Sincerely,



Heather Allison  
Policy Associate

heather@janesdueprocess.org



May 26, 2021

House Health & Human Services Committee

**Re: Letter of Support for SB21-009 Reproductive Health Care Program**

One Colorado Education Fund (OCEF) is the state's leading advocacy organization for lesbian, gay, bisexual, transgender, and queer Coloradans and their families. We have worked in a nonpartisan manner over the past eleven years to advance policy measures that help close the gap between legal and lived equality for LGBTQ Coloradans.

Health equity and ensuring access to quality healthcare are the core of One Colorado's mission to fight for a fair and just Colorado. And we know through our years of experience advocating for the health needs of our state's diverse LGBTQ community that prevention is an extremely powerful tool to decrease an individual's reliance on the healthcare system in addition to providing individuals a level of independence and authority when it comes to making informed decisions about their health.

And while the state has made great progress in addressing the health needs and historical inequalities experienced by marginalized communities, women of color and immigrant women still face substantial barriers to accessing necessary reproductive health care. Senate Bill 009 will be an important step forward to closing the health care gaps experienced by too many of our fellow Coloradans especially in light of the existing inequalities in our healthcare system that have been worsened due to ongoing pandemic along with sustained economic impact experienced by low-income frontline workers. With that, we would like to ask for the Committee's support of this important legislation.

Sincerely,

Michael Crews  
Policy Director

**Selina Najar**  
**Political Director**  
**Cobalt**  
**SB21-009: Reproductive Health Care Program (SUPPORT)**  
**May 26, 2021**  
**House Health & Insurance Comm.**

Thank you, Madame Chair and members of the committee for taking the time to read my testimony. My name is Selina Najar and I serve as the Political Director for Cobalt. I am submitting testimony in support of SB21-009: A Reproductive Health Care Program.

Originally founded in 1967 - prior to the ruling in *Roe v Wade* - Cobalt is a Colorado-based abortion rights organization. We believe that nothing should stand between you and your health decisions. And we are dedicated to fighting for systems, structures and policies that advance and protect reproductive rights and guarantee comprehensive, universal access to reproductive healthcare, including contraception - no matter who you are, where you live, how much money you make, nor your immigration status.

Not being able to get the health care that you need *inherently* leads to negative health outcomes, and there are few life events as pivotal as having a child. Women of color are unable to access essential healthcare, including access to contraception, at disproportionate rates. The ability to decide if, when, and how to have a child and plan a family lays the groundwork for an individual's healthy future and financial stability.

And for low-income women and women living in rural Colorado, monthly pharmacy refills of birth control pose a significant obstacle to ensuring a lapse in prescription doesn't occur. Varying work hours for low to middle-wage earners and long distances to rural pharmacies create a cumbersome process. Allowing folks on Medicaid to order a year's prescription of birth control at one time would substantially alleviate the existing burden so many women face.

Colorado has long served as a model for reproductive health care policies and programs across the country, and it's past time we expand Medicaid coverage for contraception to include undocumented folks. The passage of SB009 is a step toward truly promoting the health, wellbeing, and dignity of all Coloradans.

**I strongly urge a yes vote on this bill.** Thank you for your time.

Madam chair and members of the House Health and Insurance Committee,

Thank you for providing the opportunity to provide written comment. The Health District of Northern Larimer County is a Fort Collins-based special district that has a mission of improving the health of our community through direct care and through collaboration with community partners to create broader change. The Health District is in support of SB21-009.

The need for this bill is great: Only half of immigrant women received contraceptive services or information in the previous year, compared to two-thirds of US-born women. In 2016, undocumented people made up 3% of the state population and 34% of immigrants. In Colorado, Latinx individuals have the highest uninsured rate at 27% of the state's population.

The rate of unplanned pregnancies among women with incomes below the federal poverty level is nearly seven times that of women at 200% of the FPL or higher. Approximately 95% of all unintended pregnancies occur in women who do not use contraception, use it inconsistently, or use it incorrectly. The wider community also benefits from making family planning services more financially accessible. A study by the Brookings Institution found that that taxpayers spend about \$12 billion annually on publicly financed medical care for unintended pregnancies.

The Centers of Disease Control & Prevention and World Health Organization recommend providing a year-supply of oral contraceptives. A study in California found that dispensing a 1-year supply of contraceptives, rather than just a one or three month supply, is associated with a 30% reduction in the odds of unintended pregnancies and a 46% reduction in the odds of an abortion. Similarly, findings from Washington showed that when women received at least a one-year supply of oral contraceptives, rather than just an initial one-month supply, the state saved \$1.5 million due to averted births. Evidence across the country reinforces that providing women with a year-supply of contraceptives is an excellent investment in communities and reaps significant public savings.

We know Coloradans need better. Contraceptive use helps people realize their own reproductive goals which, in turn, helps them achieve their educational, employment, and financial ambitions.

This bill also makes sense for Colorado's bottom line. Data collected from 2010-2014 through the Colorado Family Planning Initiative and the use of long-acting reversible contraception (LARC) shows incredible cost avoidance – A total of \$69.6 million saved in Medicaid, TANF, SNAP and WIC.

Access to a full range of sexual and reproductive health services is critical to the well-being of individuals, families, and communities across Colorado.

Let's ensure that all Coloradans can take control of their own family planning needs. And, let's be responsible stewards of taxpayer money.

The Health District of Northern Larimer County urges you to vote 'yes' on SB21-009.

**creating a healthier community**

## Testimony | Reproductive Health Care Program (SB21-009) | Ayana Session

Hello Everyone,

My name is Ayana Session and I would like to thank you all for the opportunity to speak with you today. I am a Master of Social Work candidate at the University of Denver and have worked in the social work field for years. I am here as a professional and a community member to urge you to vote yes on SB 9.

As a social worker, I am aware of our nation's tumultuous past with reproductive care and am intimately familiar with the effects that has had on our communities. From forced sterilization to restricted access to comprehensive family planning services, we have a long-standing and disturbingly recent history of harmful practices which have disproportionately impacted immigrant communities. I am excited to see that we have an opportunity to begin correcting this history by passing SB 9 and providing undocumented immigrants with the care everyone should expect from a country as great as this one.

The lack of reproductive healthcare access continues to impact our communities today. As a social worker I have seen the harsh realities of what it means to be born to parents who were not ready to be parents or who did not want you. I have felt the pain of my clients as I poured over their adoption records bouncing through our system, listened to them guess at what the love of a parent who actually wants you around may feel like, and shared in their sorrow as they realized they did not know how to provide this to their own children, having never experienced it themselves.

As a community member, I have heard stories of pregnancy recounted as tragedies by people without access to contraception or the knowledge of how to properly use it as they lament the loss of opportunity not only for them but for their babies whom they could have been better providers to if they had only become pregnant a few years later.

These stories are made more tragic by the fact that we have the knowledge that things can be better. They just aren't. We could provide a full year's worth of contraception pills at once instead of rationing them out one or three packs at a time as though they are contraband. Research has shown this measure decreased unintended pregnancy by 30%. But we haven't done it. We could remove the unnecessary barriers to legal citizenship that come with the financial, emotional, and community strains of lack of proper access to family planning and resulting in unintended pregnancies. We know that expanding access to contraception would not only help remove these barriers, but also improve the lives of the more than 300,000 Colorado women who live in contraceptive deserts, today, and are in immediate need of publicly funded contraception. But we haven't done this either. It is my opinion as a Social worker and as someone who has lived in and loved Colorado since I was 4, that it is time we change that. It is time we work to repair our nation's history of the unjust withholding of reproductive rights and begin repairing these big problems with the easy fixes laid out in SB 9. We can do this. We must. Again thank you for your time.



## The Women's Foundation of Colorado

Women Thriving. Colorado Rising.®

### Support for SB21-009 Reproductive Health Care Program

---

## ROOTED IN RESEARCH, CONNECTED IN COMMUNITY, ADVANCING EQUITY AND INCLUSIVE PROSPERITY

The Women's Foundation of Colorado (WFCO) works for a future when **women of every background, age, and identity prosper**. WFCO is the only community foundation in our state focused exclusively on economic mobility and security for women. Our perspective is:

- rooted in research;
- informed by deep relationships with grantee partners, supporters, and collaborators across the state; and
- committed to advancing equity.

WFCO believes women's race, class, age, ability, sexual orientation, or other elements of social and/or physical identity should not define our opportunities.

## FAMILY PLANNING SUPPORTS ECONOMIC SECURITY

[Research](#) clearly links a person's complete access to reproductive health to better economic security. [WFCO supports access to the full range of reproductive health information, care, and justice for women statewide](#). We believe that women have the right to decide to have or not to have children, free from stigma.

WFCO respectfully requests your support for SB21-009, Reproductive Health Care Program. This bill will improve access to effective family planning services in two key ways.

- First, it will extend access to family planning services through Medicaid for Coloradans who need it most – undocumented immigrants who would qualify for Medicaid if not for their immigration status.
- Second, this bill improves the effectiveness of contraception available through Medicaid by ensuring that all participants have more consistent access to contraception with prescriptions for a 12-month supply. The ability to obtain a full year supply of contraceptives could improve consistent access for hundreds of thousands of women in Colorado who need publicly-funded contraception and live in contraceptive deserts.

All Coloradans will benefit from a more prosperous future when women and all our skills and talents are fully included in our communities. SB21-009 will advance this more equitable future by improving access to family planning services. Please vote yes to advance SB21-009.

On behalf of all 2.8 million women and girls in Colorado, WFCO thanks you for your consideration of this bill and your service to our State.

Louise Myrland  
Vice President of Programs  
The Women's Foundation of Colorado

#### OUR MISSION

Catalyzing community to advance and accelerate economic opportunities for Colorado women and their families.

[WFCO.ORG](https://www.wfco.org)