



March 2025

To: Members of the House Health & Human Services Committee
Re: Letter in Support of SB 183—Coverage for Pregnancy Related Services

Dear Committee Members:

The American Association of University Women (AAUW) is one of the oldest women's organizations in the country, empowering women around the world since 1881. The mission of AAUW is to advance equity for women and girls through research, education and advocacy. More than 700 community leaders are members of AAUW branches around Colorado.

Since the 1960s, Colorado has recognized and protected women's rights in regard to abortion. In 2024, we passed Amendment 79 to further secure these rights in our Constitution. SB183 will codify these rights in our statutes, and provide additional protections.

For these reasons, AAUW of Colorado strongly supports Senate Bill183 and requests your AYE vote in committee and throughout the legislative process.

Respectfully submitted,

A handwritten signature in blue ink that reads "Su Ryden". The signature is written in a cursive style and is contained within a light blue rectangular border.

Su Ryden
AAUW of Colorado Public Policy Co-Director

Suryden25@gmail.com • 16699 E. Kentucky Ave. • Aurora, CO 80017 • 303.898.5797

American Association of University Women--AAUW is a top-rated 501(c)3 charitable organization whose mission is to advance gender equity for women and girls through research, education, and advocacy.

My name is Jan Qualteri, and I am a resident of Denver writing today as a concerned citizen. I urge you to not fund Senate Bill 25-183, not only due to the severe budget shortfall our state faces but because of its violence.

Abortion is an issue that partisan Democrats have come up with to win elections. It's not about the health of a mother. Even the Pope would tell you when choosing a life, they should choose the mother.

I've been around along time and seen this time after time. Abortion is just one factor of partisan politics along with foreign wars and other fabricated issues. Attached is what abortion looks like. Violence you might say? The image isn't violent, it's an innocent lost life, but the action of abortion is. Taxpayers should not be forced to pay for it. ***In fact it's an argument to eliminate taxes altogether rather than people having to pay for such violence***

Here is a link I found on the internet.

Coincidentally it's named 79 images of Aborted Images similar to the agenda item that tricked Colorado's citizens using fear mongering and mockery. I implore you to look through the photos of what abortion really looks like.

<https://www.gettyimages.com/photos/aborted-fetus>

I respectfully ask you to oppose funding Senate Bill 25-183 and instead focus on solutions that unite us and solutions that are both financially sound and respectful of our religious diversity.

Thank you for your consideration.

The impact of cost barriers on Colorado young people seeking abortion

Kate Coleman-Minahan, University of Colorado College of Nursing

Mar Galvez Seminario, Stony Brook University

In November of 2024, Coloradans voted to remove the ban on state funding of abortion care. States that have implemented state Medicaid coverage of abortion have seen [increased access](#) to abortion care, [especially among people of color](#). As Colorado policymakers decide whether to change state statute to align with Amendment 79, as proposed in Senate Bill 25-183, we provide new scientific evidence on the barriers Colorado young people experienced due to the state funding ban. We conducted in-depth interviews with 31 Colorado young people, 15-22 years old, who obtained (n=28) or considered an abortion (n=3). Most participants (84%) identified as women of color and most (79%) had Medicaid or were uninsured.

Even with financial support from others, cost is a barrier for many young people

Among the participants who obtained an abortion, most (22/28; 79%) received abortion clinic funding and/or financial support from a partner or family member. Even with financial support, most participants (26/31; 84%) reported challenges to affording care. Among the five participants who did not report any challenges, only one reported she did not receive any financial support.

Many participants worried about paying for the abortion. Maribel said: "It was quite out of our budget, what we were trying to pay." Echoing Maribel, Maliyah recalled "At the time, because I was working part-time on and off in both places, it still seemed like a lot. It still seemed like the majority of one of my paychecks, and it was more than my rent at the time." Some participants were worried cost would prevent them from getting an abortion. Kenna described, "If I wouldn't have had my exes help, I don't know how I would've paid for it." Similarly, Krista said, "It [cost] almost prevented me from getting one." Other participants recalled the hardest part of their entire abortion experience was "the price." Mollie recalled the moment she was told the cost: "It was kind of like a 'damn' moment. It was a lot, but also, having the kid would have been a lot more." When she found out she had miscarried at the abortion appointment, she said she was "happy about it because [she] didn't have to spend that much money."

Young people experience negative consequences of cost barriers

Cost barriers limit young people's options for abortion care

Several participants described how affordability determined where they could find abortion care. Chana, who has Medicaid, had to cancel her first appointment because "it was like \$600 and that wasn't even plus tax or anything else that was gonna come with it, so I was just like, yeah I got to find something else." She chose another clinic "based off of price because I hated the fact that I had to pay for it in general. I was just like, ugh, insurance doesn't cover this." Some participants chose a medication abortion over a procedure solely because it was cheaper. Others reported that if the clinic hadn't covered some of the cost, they may not have been able to afford sedation for their procedure. Taryn recalled the clinic covered "the drugs and stuff cause... if you wanna be induced, you know knocked out, you have to pay for like IVs and stuff like that" and having sedation allowed her to be "more comfortable."

Cost barriers lead to compromising basic needs

Several participants described compromising their basic needs to pay for the abortion. When she learned that "Colorado wasn't one of the participating states" that accepted Medicaid, Isabelle had to save money for the abortion "in priority of everything else." Similarly, Natalie hoped to find a payment plan

“cause like that’s my whole check, like how am I gonna live for two weeks? Like they can’t do that no, no, no, no.” Sixteen-year-old Zariah was unhoused and living in hotels with her single mother, who had terminal cancer, when she found out she was pregnant. She described having two to three weeks to come up with \$667. Even after financial support from her mother and her boyfriend, she had to “scammer to make the money” and “put like every single dollar that I had into it.” She, and her mother with cancer, had to remain unhoused longer because she had to pay for the abortion: “I had to use some money I had put up— that’s why like these hotels are like— I ended up having to stay in them longer because money that I had put up for a place.”

Cost barriers lead to rushed care seeking and pregnancy decision-making

The cost of abortion care increases as weeks gestation increase. Young people may have to rush to come up with the money for the appointment, like Zariah, or feel rushed to make their pregnancy decision. Chloe recalled “The more weeks that you are, the more the price goes up. So, I had to make a decision fast.”

Cost barriers force unwanted pregnancy and abortion disclosure to others

Several participants experienced unwanted pregnancy and abortion disclosure when they had to ask people they didn’t want to tell about the pregnancy for help to pay for the abortion. Unwanted abortion disclosure is associated with negative [mental health outcomes](#), and for Carla, a 21 year old mother of two, may have resulted in being denied a wanted abortion. Carla could not afford \$300-\$400 for an abortion: “My rent was already like \$1,300 a month and I had just moved in and like with two kids. So yeah, it would’ve been hard to, you know, put that into my expenses.” When she asked her boyfriend for help, he not only refused, he also disclosed the pregnancy her parents who coerced her into continuing her third pregnancy by threatening to cut off financial support for her existing children. Carla wonders if she could have had the abortion if she didn’t have to pay for it on her own: “[Medicaid coverage] would be really useful for someone, or for me at the time if I would’ve gotten it [abortion], cause then you wouldn’t have to ask for support. Like in my mind, I asked my baby’s father to help me pay for it.” Among the range of consequences of being denied a wanted abortion are poorer [physical health](#) and poorer [parent-child bonding](#). Indeed, Carla’s pregnancy was “high-risk” because the “baby was not growing.” After giving birth, she described “having a hard time bonding. I mean, I have bonded with my baby, but it’s kind hard ‘cause I’m like depressed all the time and I already have to take care of two babies.”

Conclusions

In our study with Colorado young people, we found that most participants experienced challenges affording abortion care even after receiving financial support from partners, family members, and/or abortion clinic funding. Even with financial support, some young people’s lives were negatively impacted by paying for the abortion, including: Having their choice of abortion provider and abortion method limited; having their basic needs, like housing, compromised; feeling they must rush their pregnancy decision; and risking unwanted abortion disclosure. For some participants, the cost of abortion care threatened their ability to obtain a wanted abortion. Medicaid coverage of abortion would help eliminate these negative consequences for some Colorado young people.

About the study. Data are presented with pseudonyms. The Colorado Multiple Institutional Review Board approved the study. We received funding from the Society of Family Planning (SFPRF14-MA2) and the University of Colorado College of Nursing. Administrative support was provided by the University of Colorado Population Center, Eunice Kennedy Shriver National Institute for Child Health & Development (2P2CHD066613-06). The views expressed here are the authors’ own and not those of the University of Colorado.

Good afternoon. My name is Dr. Kate Coleman-Minahan. I am an associate professor at the University of Colorado College of Nursing. I am speaking on behalf of myself.

I lead a research study exploring young people's access to abortion in several states, including Colorado. In our research brief, we use Colorado young people's own words, most who have Medicaid or are uninsured, to describe cost barriers to abortion in **support of SB25-183**.

Consistent with decades of research, we found that even after financial support from a partner, family member, or abortion clinic funding, most participants faced challenges to affording care. One young woman said the cost "almost prevented her from getting an abortion" and others described the hardest part of the abortion experience was the cost. Several participants explained how cost limited where they could find care and their choice of abortion method.

Some participants had to compromise their basic needs to pay for the abortion. When one participant learned Colorado Medicaid won't cover abortion, she had to save money "in priority of everything else." Another said the cost was more than her rent. A 16-year-old with Medicaid reported that she and her mother with terminal cancer had to stay unhoused, living in hotels, longer, because she had to use her savings on the abortion.

Several participants had to tell people they didn't want to know about the pregnancy, because they needed help paying for the abortion. Unwanted disclosure is associated with negative mental health outcomes, and for one of our participants, may have resulted in being denied a wanted abortion.

When a 21-year-old mother of two asked her boyfriend to help pay for the abortion, he disclosed the pregnancy to her parents, who coerced her into continuing the pregnancy by threatening to cut off financial support for her two children. Wondering if she could have had the abortion, she explained that Medicaid coverage would mean "she wouldn't have to ask for support from others."

As a nurse practitioner, I have seen the devastated look on patients' faces when I tell them that Medicaid won't cover abortion. And as Colorado voters made clear, no one should be forced to choose between housing and an abortion or be denied essential health care due to cost. **Please vote YES.** Thank you.

My name is Jan Qualteri, and I am a resident of Denver writing today as a concerned citizen. I urge you to not fund Senate Bill 25-183, not only due to the severe budget shortfall our state faces but because of its violence.

Abortion is an issue that partisan Democrats have come up with to win elections. It's not about the health of a mother. Even the Pope would tell you when choosing a life, they should choose the mother.

I've been around along time and seen this time after time. Abortion is just one factor of partisan politics along with foreign wars and other fabricated issues. Attached is what abortion looks like. Violence you might say? The image isn't violent, it's an innocent lost life, but the action of abortion is. Taxpayers should not be forced to pay for it. ***In fact it's an argument to eliminate taxes altogether rather than people having to pay for such violence***

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I respectfully ask you to oppose funding Senate Bill 25-183 and instead focus on solutions that unite us and solutions that are both financially sound and respectful of our religious diversity.

Thank you for your consideration.

Kaylan A. Tanner
All* Above All
611 Pennsylvania Ave. SE #508
Washington, DC 20003
kaylan@allaboveall.org
March 25, 2025

RE: Letter of Support for SB25-183

Dear Chair Kyle Brown, Vice Chair Sheila Lieder, and the Members of the House Health and Human Services Committee,

We strongly support **Senate Bill 25-183** – Coverage for Pregnancy-Related Services. This bill reflects the will of Colorado voters, who overwhelmingly supported (62%) Amendment 79 to protect abortion access and remove barriers to care. SB25-183 will ensure that abortion care is covered under Medicaid and public health insurance plans, aligning Colorado’s laws with the voters’ mandate. Expanding coverage will improve health outcomes, particularly for low-income communities and people of color who face disproportionate barriers to care. This bill also guarantees that providers are fairly compensated for their services, creating a more equitable healthcare system.

As federal threats to abortion funding intensify and restrictions like the [Hyde Amendment](#) continue to deny coverage, it is critical that states take proactive steps to safeguard equitable access. The Hyde Amendment prohibits the use of federal funds for abortion care, except in cases of rape, incest, or when the life of the pregnant person is at risk. As a result, millions of low-income individuals who rely on Medicaid and other public insurance programs are effectively denied access to abortion care. Without state-level action, these restrictions will continue to block access for the most vulnerable communities—deepening health disparities and undermining reproductive freedom. SB25-183 ensures that Colorado fills this gap by guaranteeing coverage for abortion care under Medicaid and public insurance, reinforcing the state's commitment to equitable reproductive healthcare.

At [All* Above All](#), we have been leading the fight for abortion justice since 2013, launching as a women of color-led initiative to restore and protect public insurance coverage of abortion. In 2021, we expanded our mission to address broader barriers to abortion access, working at every level to ensure that everyone—regardless of income, race, or zip code—can make their own reproductive decisions.

Colorado’s leadership in reproductive freedom makes it a natural extension of this work. Colorado has been a long leader in protecting and expanding reproductive freedom, and SB25-183 continues this legacy. At a time when reproductive rights are under attack nationwide, it’s more important than ever for states to step up and protect access to care. By enshrining abortion coverage into law, Colorado would join a growing trend of states taking bold action to protect abortion access at the state constitutional level. Currently, six other states (California, Vermont, Michigan, Arizona, Missouri, and Montana) have enshrined abortion protections in their state constitutions, with Nevada also advancing similar protections pending a second voter approval in 2026. Passing SB25-183 would further solidify Colorado’s position as a national leader in reproductive justice and ensure that all Coloradans have meaningful access to abortion care, regardless of income or insurance status.

We urge the Colorado House Health and Human Services Committee to pass **SB25-183** and reaffirm the state’s commitment to reproductive freedom, equity, and justice.

Thank you for your consideration.

Sincerely,

Kaylan A. Tanner
Deputy Director of State Strategies



March 25, 2025

RE: Support for SB25-183 Coverage for Pregnancy-Related Services

Chairperson Brown and members of House Health and Human Services Committee,

Thank you for the opportunity to provide testimony in support of HB25-183. The Interfaith Alliance of Colorado promotes justice, religious liberty, and interfaith understanding through building relationships in order to educate, advocate, and catalyze social change. We are an interfaith public policy and advocacy organization with over 400 congregations in our statewide network, representing over two dozen faith traditions.

As the sole faith-based organization involved with the coalition that helped get Amendment 79 on the ballot and helped it succeed last November, we remain resolved to be a strong advocate for reproductive justice and abortion rights and access. By organizing faith leaders in support of the amendment, we were proud to continue the work we have done for many years to help people understand the longstanding and unwavering support for reproductive rights and justice espoused by people across many faith backgrounds.

HB25-183 represents the will of the people of Colorado that abortion be protected and available to those who seek it. The bill makes important changes so that abortion services are covered for state employees and those who use publicly funded insurance programs. We hope that you will vote Yes and that, in the future, our state will find avenues to provide abortion coverage for our local government employees too. As we engaged faith communities and other members of the public, two things were made clear: 1) Coloradans desire the freedom to exercise their own faith and conscience when making decisions about their reproductive healthcare, and 2) This decision is one that should be afforded to *all* Coloradans, regardless of who they are, where they work, or how they worship.

Therefore, we respectfully urge a Yes vote on SB25-063.

Thank you,

Shara Smith, Chief Executive Officer
Interfaith Alliance of Colorado

House Health & Human Services

03/25/2025 Upon Adjournment

SB25-183 Coverage for Pregnancy-Related Services

Typed Text of Testimony Submitted

Name, Position, Representing	Typed Text of Testimony
Jennifer Qualteri Against themselves	<p>Greetings, members of the Colorado General Assembly. My name is Jennifer Qualteri, and I am a resident of Denver, writing today as a person of faith and a concerned citizen. I respectfully urge you to reconsider funding Senate Bill 25-183, not only due to the severe budget shortfall our state faces but also because of the profound conflict it poses with deeply held religious beliefs.</p> <p>First, let us address the practical reality: Colorado is grappling with a \$1.2 billion budget shortfall for the upcoming fiscal year. This is not a time for expansive new spending. The state's financial reserves are dwindling. Allocating funds to SB 25-183 would divert critical resources from essential services like education, public safety, and infrastructure, which are already at risk. Lawmakers have a duty to prioritize fiscal responsibility, especially when the Joint Budget Committee is scrambling to make cuts just to keep the state's budget balanced. How can we justify new expenditures when we cannot even meet our existing obligations?</p> <p>Beyond the fiscal argument, I oppose this bill on the grounds of many religious convictions. that believe that life is sacred.</p> <p>Senate Bill 25-183, funds initiatives that promote values contrary to many Coloradoans faith, undermines parental authority and supports policies that conflicts with respect.</p> <p>For example, by allocating taxpayer dollars to programs that normalize practices that faith deems immoral, this bill forces us to financially support actions many believe are wrong. This is not just a policy disagreement it is a violation of conscience and right to live according to principles.</p>

	<p>The First Amendment guarantees our freedom to practice faith without interference from the government. When the state uses tax dollars to fund initiatives that contradict with beliefs, it effectively compels us to act against our moral compass. In a state as diverse as Colorado, we should strive for policies that respect all viewpoints, not ones that pit fiscal recklessness against the spiritual well-being of its citizens.</p> <p>I implore you to consider the broader implications of this bill. With a budget crisis looming, we cannot afford to deepen our financial woes. With faith as a cornerstone for so many Coloradans, we cannot afford to alienate those who feel their values are under attack. I respectfully ask you to oppose funding Senate Bill 25-183 and instead focus on solutions that unite us and solutions that are both financially sound and respectful of our religious diversity.</p> <p>Thank you for your time and consideration</p>
<p>Rich McLean Against themselves</p>	<p>What really is quite crass and shocking is the fact the bill mentions "savings" of abortion vs cost of delivery and maternal care. The fact that this especially for those of lower socioeconomic backgrounds is an eerily reminder of the eugenics talk of 100 years vailed in "choice" and "freedom."</p> <p>It is a grotesque bill that is advocated for that reason.</p>
<p>Julie Trujillo Against themselves</p>	<p>Dear Colorado Health and Human Services Representatives,</p> <p>As a Colorado taxpayer and health care provider, I am urging you to vote against the SB 183 bill. This is an infringement on the First Amendment rights of conscience of Coloradan taxpayers who do not support abortion. Myself and many Coloradoan taxpayers will be forced to either not pay taxes, risking our livelihood, or to go against our consciences to participate in abortion funding. Furthermore, I am also appalled that the Colorado legislature is more concerned about costs to the state than the millions of children that they project will be killed because of this law. Every child's life is precious and priceless, look at your own children and this truth cannot be denied. Better services to support women and children is needed, but not by funding abortion which only diminishes the dignity and value of the woman and child. Women who are choosing abortion do so not because of a want but as a trapped creature who would cut off their own leg in order to survive. Helping women in these crisis situations with compassion and support is investing in a community where</p>

	<p>kindness is payed forward and respect and dignity thrive. We all need options, we all need help, but this world does not need more abortion. It needs healing and connection. Using taxpayer dollars to walk alongside women and children is important, not to fund decreasing their human value.</p> <p>Please say no to this bill and choose a better life for Colorado. Thank you for your time and leadership.</p> <p>Respectfully, Julie Trujillo</p>
<p>Justina Nazario For themselves</p>	<p>Honorable Members of the Committee,</p> <p>My name is Justina Nazario, and I am a midwife, birth advocate, and owner of a midwifery practice providing person-centered, evidence-based care in Colorado. I am testifying in strong support of this bill, which ensures comprehensive pregnancy-related services, including abortion care, are accessible to all who need them.</p> <p>As a midwife dedicated to reproductive justice, I witness firsthand the disparities in healthcare access, particularly among Black, Indigenous, and other marginalized communities. For far too long, financial barriers have limited people’s ability to make the best choices for themselves and their families. By expanding Medicaid and the Children's Basic Health Plan (CHP+) to cover abortion care, this bill aligns Colorado’s policies with the will of the people, as expressed through the passage of Amendment 79.</p> <p>Abortion is essential healthcare. Denying coverage for it has never prevented the need for it—only created unnecessary burdens, disproportionately harming those with the fewest resources. This bill rectifies longstanding inequities by ensuring that everyone, regardless of income, has the ability to access the full spectrum of reproductive healthcare, including abortion, without financial or systemic barriers.</p> <p>As a provider, I know that reproductive autonomy means having real choices. This legislation strengthens that autonomy, reinforcing that no person should be denied care because of their economic status. I</p>

	<p>urge you to support this bill and continue Colorado’s commitment to reproductive freedom, equity, and evidence-based healthcare.</p> <p>Thank you for your time and consideration.</p> <p>Justina Nazario, BSM, CPM Midwife & Reproductive Justice Advocate Justina@elephantcircle.org</p>
<p>Anthony Madrid Against themselves</p>	<p>Dear Colorado Health and Human Services,</p> <p>I am a practicing Physician in the great state of Colorado. Every LIFE is sacred.</p> <p>I am AGAINST Amendment 79. I am also against SB 183; that will attempt to allow tax dollars to pay for abortion.</p> <p>Cordially,</p> <p>Anthony E> Madrid, MD</p>
<p>Thomas Jensen Against themselves</p>	<p>I am writing for the record that the use of tax payer dollars to directly fund abortion is illegal as well as the language of this bill stating the savings of abortion over delivery (and of course connected the care of a newborn) is eerily mimicking the eugenics programs of the 20th Century especially as this money will be allocated to terminate unborn of lower socioeconomic backgrounds. You again are frankly falling back into the mentality of that former age we should never wish to repeat. Death has become the treatment when love is inconvenient. The advent of abortion has not reduced poverty, no data supports this. No science supports the killing of innocent life. If it is wrong to kick your child out of your house because they cry too much and disturb your health claiming my house my rights same applies to an 8 month unborn child. Try wrestling with that dilemma in your “moral conscience” which you protect but mine as a prolife physician is wrong and unacceptable. Choice is about power, not true freedom. The more power we seek the less free we tend to become.</p>
<p>Lloyd Benes Against</p>	<p>My name is Lloyd Benes, representing myself & asking for a no vote on Senate Bill 25-183.</p>

<p>themselves</p>	<p>Colorado allows 2nd & 3rd trimester abortions without regulations or inspections, therefore we are not ready to expand abortions with public funding and kill more women with those deadly procedures.</p> <p>Testimony was given on March 11, 2025 on House Bill 25-1252 by Dr Kari Kasun. This testimony is public record that you can hear at timestamps 12:09 and 12:16 on the audio recording of that Bill's testimony.</p> <p>On Feb 6, 2025, Planned Parenthood in Fort Collins had Lexi Arguello transported by ambulance to the hospital where she died from complications of the abortion. Her grandparents shared details with Dr. Keri Kasun, who testified that Lexi suffered "an amniotic fluid embolism leading to massive bleeding. Dr Kasun said, "She did not come in with this". Lexi was hospitalized too late, leading to her death. Kasun testified, "The abortion industry wants to legitimize itself as a form of women's health care, but they don't want regulations or accountability. I would consider that 'back-alley'".</p> <p>Out-of-state women are seeking abortions in Colorado. Nebraska's Jennifer and Jason DeBuhr sued Dr. Warren Hern after he left a skull fragment in Jennifer's uterus, resulting in a hysterectomy. At the same committee hearing Dr Kasun testified at, Planned Parenthood's Claudia Perez called Colorado clinics a "beacon of hope" for patients forced to travel across state lines for abortion" (tinyurl.com/4bn6f9zf, timestamp 11:41:35). Would Jennifer DeBuhr—or Lexi Arguello, who died after her Fort Collins Planned Parenthood abortion—agree?</p> <p>Shouldn't women's safety be the highest priority? If you believe women deserve quality, safe care, VOTE AGAINST SB 25-183 because the time is all wrong to pay for abortions with public tax dollars when women are at such risk in Colorado abortion clinics.</p>
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The Honorable Committee Members,

I am writing to inform you that I OPPOSE SB25-183 requiring the medical services board to include abortion care which will include public funding through Medicaid. I ask that you please consider my request to NOT pass or approve of this legislation. I find it appalling to have public, i.e.. taxpayer, funding of any type of killing as I consider abortion the taking of innocent life.

Again, I ask that you please consider my request to NOT PASS or approve of this legislation.

Respectfully,
John Heimsoth
Colorado Springs

Good morning, Representative Brown.

As an associate professor at the University of Colorado College of Nursing, I lead a research study exploring young people's access to abortion in several states, including Colorado. Due to my schedule I am unable to testify today in support of SB25-183. Attached are my testimony, written on behalf of myself, and a research brief on cost barriers experienced by Colorado young people seeking abortion care.

Thank you,
Kate Coleman-Minahan, PhD, RN, FNP-BC



James R. Potter
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864-316-1058

March 18, 2025

Colorado House of Representatives
House Health & Human Services Committee
Colorado State Capitol
200 E Colfax Ave
Denver, CO 80203

Re: Testimony in Support of SB25-183 Coverage for Pregnancy-Related Services

Dear Chair Brown, Vice Chair Lieder, and Honorable Members of the Committee,

I am submitting written testimony to express the support of the Colorado Foundation for Universal Health care for SB25-183, a critical piece of legislation that will expand access to abortion services for individuals across Colorado. As a 501(c)(3) organization dedicated to universal health care, we believe that ensuring comprehensive health care coverage for abortion services is a fundamental step toward protecting reproductive rights and ensuring equitable health care access in our state.

Abortion care is essential health care. SB25-183 addresses crucial gaps in our health care system, ensuring that individuals can access safe and legal abortion care without financial or logistical barriers. This legislation is particularly important for low-income individuals and marginalized communities who often face the greatest obstacles in obtaining reproductive health care. It fills a necessary discriminatory gap in coverage for Medicaid recipients and puts them on an equal footing of access and choice in making health care decisions.

For many individuals, financial constraints and restrictive policies limit their ability to access timely abortion care. By ensuring that abortion services are covered, this bill promotes health care equity and protects the right of individuals to make personal medical decisions.

Furthermore, comprehensive abortion access supports overall public health by reducing unsafe procedures and allowing individuals to make the best choices for their health, families, and futures. Safe and legal abortion services are a cornerstone of reproductive health care, and ensuring coverage for these services is an essential step toward advancing reproductive justice in Colorado.

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Testimony in Support of SB25-183
March 18, 2025

Additionally, SB25-183 reflects the will of Colorado voters, who have demonstrated their commitment to reproductive rights by amending the state Constitution to allow state funding for abortion services. This legislation upholds the principles of democracy by ensuring that policies align with the expressed will of the people, reinforcing Colorado's commitment to reproductive freedom.

This bill is not just about health care—it is about bodily autonomy, individual rights, and ensuring that all people have the ability to make decisions about their own reproductive health. Expanding coverage for abortion services is a fiscally responsible, compassionate, and necessary step forward. As the Fiscal Note demonstrates, Colorado will actually save money by allowing people to freely choose whether or not to have children.

We urge the members of this committee to support SB25-183 and ensure that all individuals in Colorado have access to the reproductive health care they need. Thank you for your time and consideration.

Sincerely,

A handwritten signature in black ink that reads "James R. Potter". The signature is written in a cursive style with a large, sweeping initial "J".

James R. Potter
Board Member







