

---

Daily News

## Defund Planned Parenthood?

The family planning group could reap a financial windfall, if healthcare reform includes contraceptive services with mandated preventive care for women.

BY JOAN FRAWLEY DESMOND

| Posted 1/31/11 at 10:38 AM

WASHINGTON, D.C. — A push to include contraceptive services and sterilizations in mandated preventive care for women has deepened fears that the new health-care law will threaten conscience rights of Catholic employers and healthcare professionals.

The Institute of Medicine is a non-profit, non-governmental organization founded under the congressional charter of the National Academy of Science to provide advice on biomedical science, medicine, and health.

Last fall, the Institute's Committee on Preventive Services for Women conducted two public hearings on the issue, but participation by Catholic and pro-life groups was limited to the brief, general public comment portion of the meeting. The Institute was soliciting public input on mandated preventive care for women and to make policy recommendations to the U.S. Preventive Services Task Force.

Federal regulators must determine whether contraceptive services will be included in mandated preventive services for women by August, when the list of mandated services will be issued.

Planned Parenthood and similar organizations with a stake in contraceptive services have been among the invited speakers at the hearings.

The latest Institute of Medicine hearing was Jan 12, 2011. There will be one more meeting in the spring.

A blogger for Raising Women's Voices, a healthcare advocacy group that backs the inclusion of contraceptive services in mandated care, posted this approving report on the latest January 12th Institute hearing: "The invited presenters this week included many experts who share RWV's goal of ensuring that contraceptive supplies, services and counseling will be protected from cost-sharing, as Congress intended when it added the Women's Health Amendment to the Affordable Care Act. Two panels of speakers from women's health organizations and national health interest groups — including the Guttmacher Institute, the American College of Nurse-Midwives and the Association of State and Territorial Health Officials and the American Academy of Pediatrics — all urged the committee to recognize in its recommendations that comprehensive contraceptive care is a critically important part of women's preventive health care."

Fred Caesar, spokesman for Sister Carol Keehan, president and CEO of the Catholic Health Association, a trade group, confirmed that CHA had not been invited to present at the hearings, but he would not say whether Sister Carol had submitted a statement or planned to attend a future hearing.

“There is a concerted campaign by Planned Parenthood and other family planning advocates to push for the inclusion of contraception among the mandated — co-pay-free — services under health-care reform,” said Deirdre McQuade, spokeswoman for the Secretariat for Pro-Life Activities of the U.S. Conference of Catholic Bishops.

“We don’t have a crystal ball, but if contraception is included, it would include all the methods approved by the Food and Drug Administration (FDA), including ‘ella,’ a drug capable of dislodging an implanted embryo, which by anyone’s view is an abortion,” noted McQuade, who participated in one Institute of Medicine hearing as an uninvited presenter.

### ‘Unprecedented Threat’

Under the new Patient Protection and Affordable Care Act, all health insurers will be required to pay for preventive services that the U.S. Preventive Services Task Force recommends. Some experts predict that the advent of free contraception will be a financial windfall for family-planning providers like Planned Parenthood.

The USCCB and the National Catholic Bioethics Center, backed by a coalition of pro-life groups, have sought to redirect the Institute of Medicine proceedings, asserting that Catholic hospital networks — the largest non-governmental provider of health care in the nation — should have a larger role in the discussion.

As the August deadline draws closer, the U.S. bishops’ conference and its allies have provided oral and written arguments challenging the inclusion of contraceptive services in preventive care for women. They have underscored the threat such mandates would pose to the conscience rights of Catholics, and other pro-life employers and health-care professionals, to opt out of the mandates.

“These drugs, devices and procedures prevent not a disease condition, but a healthy condition known as fertility; they pose significant risks of their own to women’s life and health; and a federal program to mandate their inclusion would pose an unprecedented threat to the rights of conscience,” stated Anthony Picarello, Jr., the USCCB General Counsel, in a letter to the Department of Health and Human Services (HHS).

Marie Hilliard, director of Bioethics and Public Policy at the National Catholic Bioethics Center, protested the exclusion of Catholic health-care groups from the list of invited speakers at the hearings. During an interview, she underscored concerns that she had outlined in a letter to the HHS: “The presenters included, almost to the person, representatives of agencies which would benefit financially if contraceptives and abortifacients were included as preventative services in the required packages for providers.”

Cecile Richards, president of Planned Parenthood Federation of America, has welcomed the new healthcare law as a landmark effort to “increase access to contraception for women, and potentially allow for all FDA-approved prescription contraception to be available without co-pays and other out of pocket costs.”

The latest pro-life battle prompted by the passage of the health-care bill comes amid fresh Republican legislative challenges to President Barack Obama's signature domestic policy achievement. In the wake of the House's repeal of the healthcare reform law — a largely symbolic effort, given the Democrats' control of the Senate and the White House, the Senate now appears headed for a similar vote.

In mid-January, pro-life congressmen introduced three bills designed to permanently ban federal funding of abortion and secure conscience protections. One bill, co-sponsored by Rep. Chris Smith, R-N.J., and Rep. Daniel Lipinski, D-Ill., — the “No Taxpayer Funding for Abortion Act” — would enact the policy of the Hyde Amendment on abortion funding, and the Hyde/Weldon Amendment on conscience rights, into permanent law for all federal departments and all avenues of federal funding.

The USCCB has announced it would not support a repeal of the new health-care law, despite the conference's vigorous 2010 effort to block its passage. A variety of states have challenged the constitutionality of the bill, and legal experts predict the future of the law will be decided by the Supreme Court.

The effort to secure a broader range of mandated preventive care for women began after a dispute over federal guidelines for mammograms surfaced in late 2009. Sen. Barbara Mikulski, D-Md., introduced an amendment that challenged federal recommendations that raised the age for mammograms but also called for expanded coverage of preventive care for women.

“Although much of the floor debate over Mikulski's amendment centered on mammography, the provision itself was clearly designed to guarantee coverage without cost-sharing of a far broader group of preventive services, notably including family planning. At least six senators joined Mikulski in praising the amendment's inclusion of family planning,” noted Adam Sonfield in the Spring 2010 issue of the Guttmacher Policy Review, published by the Guttmacher Institute, a key research group allied with family-planning organizations.

During the Senate floor debate, Mikulski told Sen. Robert Casey, Jr., D-Pa.: “This amendment does not cover abortion.” Pro-life groups use her statement to challenge the inclusion of abortifacients like IUDs or “ella” in mandated preventive care. Sen. Mikulski's office did not respond to a request for comment.

A final decision could depend, in part, on whether proponents can successfully establish precedents for the inclusion of contraceptive services under the umbrella of “preventive care.”

Certainly, contraceptive use has become entrenched in American society: About nine in 10 employer-sponsored health plans cover the most common methods of artificial birth control, and family planning groups tout the cost savings of limiting births and keeping women on the job.

For now, the USCCB and its allies have a steep road ahead. Said McQuade, “There is no wiggle room.”

Register correspondent Joan Frawley Desmond writes from Washington, D.C.