

# THE STATE OF REPRODUCTIVE HEALTH AND RIGHTS: **A 50-State Report Card**



## REPRODUCTIVE HEALTH AND RIGHTS AT A TIPPING POINT

### 18 States Receive a “B” or Higher and 27 States Receive a “D” or Lower For the Second Year in a Row, US Receives Failing Grade

For more than a decade now, opponents of reproductive rights have been relentlessly chipping away at state protections. As highlighted by this year’s 50-state report card, reproductive rights now vary dramatically from state to state. Eighteen states this year earned a ‘B’ or higher, while 27 states received a ‘D’ or lower. Also, for the second year in a row, the U.S. as a whole received a failing grade, reflecting continued Trump administration assaults on reproductive health and rights.

The reproductive rights divide, already stark, is likely to grow as a result of Trump-era changes in the makeup of the federal judiciary. It’s not just the appointment of three anti-abortion justices to the U.S. Supreme Court; president Trump also appointed more than 200

justices to the lower federal courts. The battle over reproductive rights will likely intensify as a result.

There are already direct challenges to *Roe v. Wade* working through the court system and states will continue to pass new legislation to make it as difficult as possible for people to access care. For many people the promise of *Roe* has never been a reality and this will only push it further out of reach making it even more difficult for people to access abortion services.

In recent years reproductive health and rights have also suffered major programmatic setbacks at the federal level. In 2019 the Trump administration finalized regulations that substantially altered Title X, the 50-year old federal-state partnership that supports family

planning clinics serving low-income households. Frequently referred to as the “domestic gag rule,” the new regulations prohibited Title X family planning physicians and staff from counseling patients on abortion or referring them to abortion providers. In response to the new regulations, Planned Parenthood and other abortion providers dropped out of the program. The Guttmacher Institute reported that the changes slashed the Title X national family planning network’s patient capacity in half, jeopardizing care for 1.6 million patients.

While reproductive health and rights advocates hope that the Biden/Harris administration will do much to undo the damage inflicted by the Trump/Pence administration, it may take years to accomplish.



## THE UNITED STATES GETS AN F

### The United States as a whole has been given a grade of ‘F’. Here’s why:

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program that was providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ protections.

The Trump/Pence administration sought to slash federal support for evidence-based, comprehensive sexuality education. Instead, the administration promoted “sexual risk avoidance” programs that embrace the failed “abstinence-only” approach backed by conservatives.

## GRADING REPRODUCTIVE HEALTH AND RIGHTS

While most Americans are aware of the national political debate over birth control and abortion, many are unaware of the status of reproductive health and rights in their own state. In the interest of an informed public debate, the Population Institute, for the eighth year in a row, is releasing a report card that gives an overview of what's happening in the 50 States and the District of Columbia.

### THE 50-STATE REPORT CARD

**Focus:** The 50-state report card focuses on four broad indicators or policies relating to reproductive health and rights:

#### Effectiveness (20 points):

Statewide, what percentage of pregnancies are unintended, and how high is the state's teenage pregnancy rate?

#### Prevention (30 points):

Does the state promote comprehensive sex education in the schools, allow nurses to dispense medications, and allow minors to consent to contraceptive services?

#### Affordability (25 points):

Has the state expanded Medicaid access under the Affordable Care Act? Does the state have policies designed to make birth control affordable to uninsured and low-income individuals, and do they allow insurance coverage of abortion services?

#### Access (25 points):

Does the state impose harassing or burdensome requirements on those seeking family planning or abortion services?

### CRITERIA AND SCORES

Eleven criteria are used in determining a state's composite score. States with the best grades will have:

1. A low rate of teenage pregnancy (10 points maximum)
2. A low rate of unintended pregnancy (10 points maximum)
3. Comprehensive sex education in the schools (15 points maximum)
4. Nurses authorized to dispense medications (5 points maximum)

5. Emergency Contraception Mandated in Emergency Room (5 points maximum)
6. Minors access to contraceptive services (5 points maximum)
7. Medicaid expansion under the Affordable Care Act (15 points maximum)
8. A Medicaid "waiver" expanding eligibility for family planning services (5 points maximum)
9. Insurance coverage of abortion services (5 points maximum)
10. An absence of burdensome abortion restrictions (10 points maximum)
11. An absence of TRAP Laws (Targeted Regulation of Abortion Providers) (5 points maximum)
12. Abortion Policy in Absence of Roe (5 points maximum)
13. County-level access to family planning and abortion services (5 points maximum)

## CORE GRADE

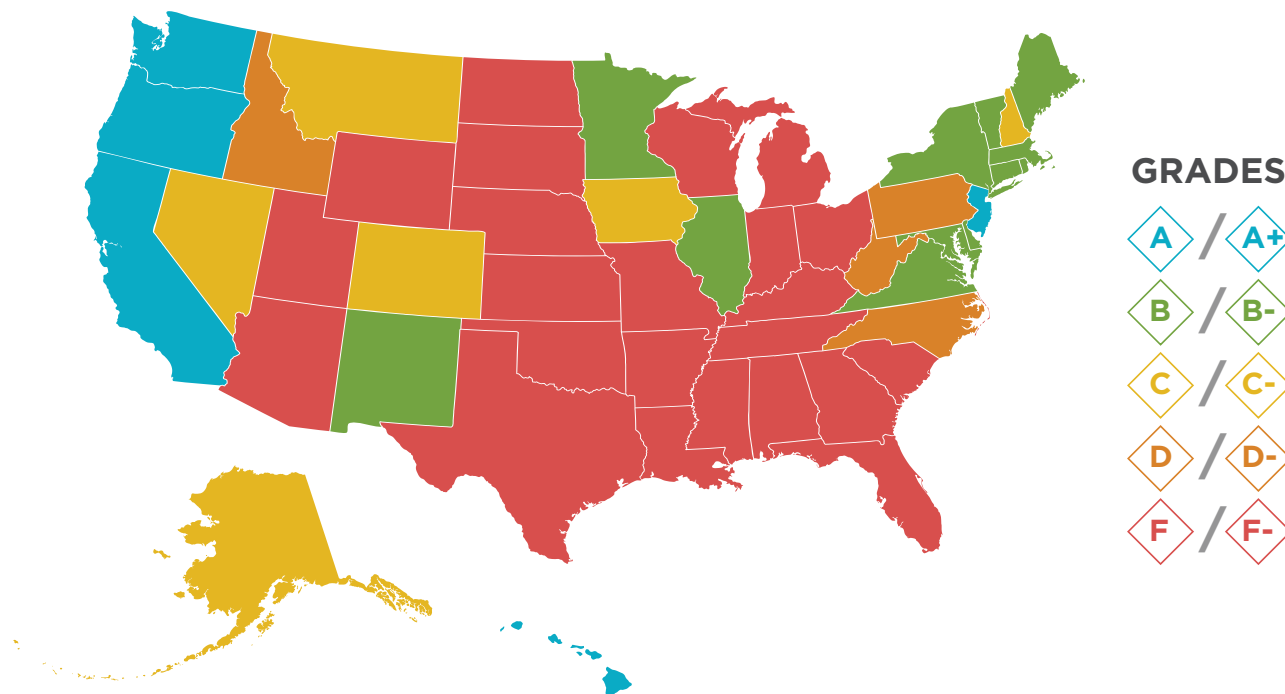
Each state is assigned a "core" grade based upon the following grading system:

**A: 86-100 points   B: 71-85.9 points   C: 61-70.9 points   D: 50-60.9 points   F: < than 49.9 points**

STATE	TOTAL SCORE	LETTER GRADE	STATE	TOTAL SCORE	LETTER GRADE	STATE	TOTAL SCORE	LETTER GRADE	STATE	TOTAL SCORE	LETTER GRADE
AL	27.1	F-	IL	75.8	B	MT	70.9	C-	RI	74.2	B+
AK	67.2	C	IN	35.4	F-	NE	35.2	F	SC	42.1	F-
AZ	41.2	F-	IA	65.8	C-	NV	63.8	C	SD	22.6	F-
AR	37.4	F-	KS	28.4	F	NH	62.8	C	TN	39.3	F-
CA	96	A+	KY	33.6	F-	NJ	87.9	A-	TX	42.5	F-
CO	67.9	C-	LA	34.6	F	NM	77.8	B+	UT	39.7	F
CT	71.5	B+	ME	81.2	B	NY	79.1	B	VT	78.1	B
DE	72.7	B-	MD	81.1	B-	NC	54.2	D-	VA	78.4	B-
DC	81.6	B+	MA	71.2	B-	ND	40.3	F-	WA	92.4	A+
FL	34.9	F	MI	30.3	F-	OH	37	F-	WV	55	D
GA	44.3	F	MN	71.1	B	OK	25.5	F	WI	29.5	F-
HI	86.6	A-	MS	23.6	F-	OR	93.4	A+	WY	49.2	F
ID	54.1	D	MO	27.4	F-	PA	60.7	D-			

## FINAL GRADE

If there are noteworthy developments or other important policies that are not reflected in the state's "core" grade, a state may be accorded a plus (+) or a minus (-), depending on how the changes are likely to impact reproductive health and rights.



## STATE BREAKDOWNS

For state press releases and state-by-state breakdowns of the scoring, more information can be obtained at [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

## FOR MORE INFORMATION

About teenage pregnancy in the U.S., see

<https://www.guttmacher.org/report/pregnancies-births-abortion-in-united-states-1973-2016>

About the rate of unintended pregnancies in the U.S., see

<https://www.guttmacher.org/reports/pregnancy-desires-and-pregnancies-state-level-estimates-2014>

About state abortion restrictions, see <https://www.guttmacher.org/state-policy/explore/overview-abortion-laws>

About State Medicaid Expansions, see

<http://kff.org/health-reform/state-indicator/state-activity-around-expanding-medicare-under-the-affordable-care-act/>

About state Medicaid family planning waivers, see

<https://www.guttmacher.org/state-policy/explore/medicaid-family-planning-eligibility-expansions>

About sex education requirements at the state level, see

<https://www.guttmacher.org/state-policy/explore/sex-and-hiv-education>

## ACKNOWLEDGEMENTS

We wish to express our deep appreciation to the Guttmacher Institute, the Kaiser Family Foundation, Planned Parenthood Federation of America, National Health Law Program and other organizations working in this field for the research and reporting that made this report card possible.



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## POPULATION INSTITUTE'S ANNUAL REPORT CARD SHOWS



# Access to Reproductive Health and Rights at a Tipping Point: U.S. Gets an “F”

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. The report card, the most comprehensive of its kind, tracks multiple indicators of reproductive health and rights, including access to family planning, sex education, and abortion services. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute's director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

### METHODOLOGY

Using thirteen criteria, the Institute's report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

### STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year's report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

### THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

#### Title X

The Trump/Pence administration's imposition of a “domestic gag rule,” which

bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

#### Federal Courts

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#### Sex Education

The Trump/Pence administration sought to slash federal support for evidence-based, comprehensive sexuality education. Instead, the administration promoted “sexual risk avoidance” programs that embrace the failed “abstinence-only” approach backed by conservatives.

### LOOKING AHEAD

In releasing this year's report card, Wetter warned that, “While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community.”



# ALABAMA

is one of 23 states receiving  
a failing grade

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## ALABAMA’S GRADE

**Alabama** received an “F” this year. Most notably, Alabama received poor marks for:

**Alabama** has decided not to expand their Medicaid program under the Affordable Care Act.

**Alabama** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; there is a mandatory ultrasound where the patient must be given an opportunity to view the image; there is a waiting period of 48 hours between the patient receiving counseling and obtaining an abortion; parental consent is required; and clinicians who perform medication

abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

**Alabama** was given minus because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

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## BREAKDOWN OF SCORES

# F- 27.1 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.3 / 10

Alabama has a teen pregnancy rate of 40 pregnancies per 1,000 women aged 15-19. We have set 24 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Alabama has achieved 73.3% of the objective.

#### Unintended Pregnancy Rate 6.8 / 10

44% of Alabama's total pregnancies are unintended, compared to the objective of 30%. Thus, Alabama has achieved 68.2% of the target rate.

### PREVENTION

#### Sex Education 5 / 15

Alabama requires HIV education with information on condoms in its sex education curriculum, but not other methods of contraception.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 0 / 5

Alabama does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Alabama does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

Alabama has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Alabama offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver, is offered to people with an income level up to 146% of the federal poverty line. The family planning expansion is also extended to include men.

#### Insurance Coverage of Abortion 0 / 5

Alabama restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, or incest in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 1 / 10

Alabama has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; there is a mandatory ultrasound where the patient must be given an opportunity to view the image; there is a waiting period of 48 hours between the patient receiving counseling and obtaining an abortion; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Alabama has enacted a series of TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Alabama has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 2 / 5

59% of women in Alabama live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# ALASKA

is one of 6 states  
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## ALASKA’S GRADE

**Alaska** received a “C” this year. Most notably, Alaska received mixed marks for:

**Alaska** has expanded their Medicaid program under the Affordable Care Act.

**Alaska** currently does not offer an expansion for family planning services to the Medicaid plan.

**Alaska** does not mandate sex education in public schools.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new

restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# ALASKA

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## BREAKDOWN OF SCORES

# C 67.2 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.3 / 10

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#### Unintended Pregnancy Rate 8.9 / 10

35% of Alaska's total pregnancies are unintended, compared to the objective of 30%. Thus, Alaska has achieved 88.6% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Alaska does not mandate sex education in public schools.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Alaska does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Alaska explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Alaska has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Alaska currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 5 / 5

Alaska does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 8 / 10

Alaska has the following laws, which make it unnecessarily difficult for someone to have an abortion: a person planning on receiving an abortion must undergo mandatory counseling including misinformation on link to breast cancer and fetal pain; and clinicians who perform medication abortion procedures are required to be licensed physicians.

#### TRAP Laws 5 / 5

Alaska has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Alaska does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 3 / 5

32% of women in Alaska live in a county without an abortion provider.

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## ARIZONA’S GRADE

**Arizona** received an “F” this year, most notably, Arizona received poor marks for:

**Arizona** does not mandate sex education in public schools.

**Arizona** has the following laws, which make it unnecessarily difficult for someone to have an abortion: there is a mandatory waiting period of 24 hours between pre-abortion counseling and obtaining an abortion; there is a mandatory ultrasound where the patient must be given an opportunity to view the image; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the

presence of the patient which by extension bans telemedicine.

**Arizona** was given minus because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

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# ARIZONA

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F- 41.2 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.2 / 10

Arizona has a teen pregnancy rate of 35 pregnancies per 1,000 women aged 15-19. We set 24 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Arizona has achieved 81.6% the objective.

#### Unintended Pregnancy Rate 8 / 10

39% of Arizona's total pregnancies are unintended, compared to the objective of 30%. Thus, Arizona has achieved 79.5% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Arizona does not mandate sex education in public schools.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Arizona does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Arizona explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

Arizona has expanded their Medicaid program under the Affordable Care Act, but they have enacted harmful waivers such as work requirements that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 0 / 5

Arizona currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

Arizona restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life or severe health impacts in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 3 / 10

Arizona has the following laws, which make it unnecessarily difficult for someone to have an abortion: there is a mandatory waiting period of 24 hours between pre-abortion counseling and obtaining an abortion; there is a mandatory ultrasound where the patient must be given an opportunity to view the image; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Arizona has enacted a series of TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Arizona has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 4 / 5

18% of women in Arizona live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# ARKANSAS

is one of 23 states receiving  
a failing grade

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## ARKANSAS’S GRADE

**Arkansas** received an “F” this year. Most notably, Arkansas received poor marks for:

**Arkansas** requires HIV education, but does not mandate that education include condoms.

**Arkansas** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks of pregnancy; the patient must undergo mandatory counseling including information on fetal pain after 20 weeks’ gestation; there is a mandatory waiting period of 72 hours between pre-abortion counseling and undergoing the procedure; parental consent is required; and clinicians who perform medication abortion

procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

**Arkansas** received a “minus” because of a law that prevents abortion providers from receiving family planning funding.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# ARKANSAS

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# F- 37.4 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.3 / 10

Arkansas has a teen pregnancy rate of 46 pregnancies per 1,000 women aged 15-19. We set 30 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Arkansas has achieved 73.3% of the objective.

#### Unintended Pregnancy Rate 8.6 / 10

36% of Arkansas's total pregnancies are unintended, compared to the objective of 30%. Thus, Arkansas has achieved 86.4% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Arkansas requires HIV education, but does not mandate that education include condoms.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 2.5 / 5

Arkansas requires emergency rooms to provide information about emergency contraception, but does not require they dispense it upon request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Arkansas explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

Arkansas has expanded their Medicaid program under the Affordable Care Act, but they have enacted harmful waivers such as work requirements and lock out penalties that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 0 / 5

Arkansas currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

Arkansas restricts coverage of abortion in private insurance plans by only allowing abortion coverage for cases of life, rape, or incest in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 1 / 10

Arkansas has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks of pregnancy; the patient must undergo mandatory counseling including information on fetal pain after 20 weeks' gestation; there is a mandatory wait-ing period of 72 hours between pre-abortion counseling and undergoing the procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Arkansas has enacted a series of TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Arkansas has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 0 / 5

77% of women in Arkansas live in a county without an abortion provider.

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# CALIFORNIA

is one of 18 states receiving  
a “B” or higher

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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## CALIFORNIA’S GRADE

**California** received an “A” this year. Most notably, California received high marks for:

**California** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception, and requires that the education be medically accurate.

**California** currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

**California** received a “plus” because they mandate their sex education program

include information on sexual orientation and that it be inclusive. They also mandate the sex education program teach about consent.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.





# CALIFORNIA

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# A+ 96 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.3 / 10

California has a teen pregnancy rate of 32 pregnancies per 1,000 women aged 15-19. We set 22 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that California has achieved 83.3% of the objective.

#### Unintended Pregnancy Rate 7.7 / 10

40% of California's total pregnancies are unintended, compared to the objective of 30%. Thus, California has achieved 77.4% of the target rate.

### PREVENTION

#### Sex Education 15 / 15

California mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception, and requires that the education be medically accurate.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 5 / 5

California requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

California explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

California has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

California offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with incomes up to 200% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under 19 years old.

#### Insurance Coverage of Abortion 5 / 5

California does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

California currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

California has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

California does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 5 / 5

3% of women in California live in a county without an abortion provider.

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**POPULATION  
INSTITUTE**



# COLORADO

Alaska is one of 6 states  
receiving a “C”

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## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## COLORADO’S GRADE

**Colorado** received a “C” this year. Most notably, Colorado received mixed marks for:

**Colorado** has expanded their Medicaid program under the Affordable Care Act.

**Colorado** explicitly allows all minors to consent to contraceptive services.

**Colorado** does not mandate sex education in public schools.

**Colorado** received a “minus” because of a law that prevents abortion providers from receiving family planning funding.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers,

including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# Colorado

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# C- 67.9 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.5 / 10

Colorado has a teen pregnancy rate of 28 pregnancies per 1,000 women aged 15-19. We set 19 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Colorado has achieved 85% of the objective.

#### Unintended Pregnancy Rate 8.9 / 10

35% of Colorado's total pregnancies are unintended, compared to the objective of 30%. Thus, Colorado has achieved 88.6% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Colorado does not mandate sex education in public schools.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 2.5 / 5

Colorado requires emergency rooms to provide information about emergency contraception, but does not mandate they dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Colorado explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Colorado has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Colorado currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 5 / 5

Colorado does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 9 / 10

Colorado requires parental notice before a minor may obtain an abortion.

#### TRAP Laws 5 / 5

Colorado has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Colorado does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 4 / 5

27% of women in Colorado live in a county without an abortion provider.

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# CONNECTICUT

is one of 18 states receiving  
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## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## CONNECTICUT’S GRADE

**Connecticut** received a “B” this year. Most notably, Connecticut received high marks for:

**Connecticut** has expanded their Medicaid program under the Affordable Care Act.

**Connecticut** offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with incomes up to 263% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

**Connecticut** currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

**Connecticut** received a “plus” because they mandate their sex education program include information on sexual orientation and that it be inclusive.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

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impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

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# CONNECTICUT

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## BREAKDOWN OF SCORES

# B+ 71.5 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 9 / 10

Connecticut has a teen pregnancy rate of 21 pregnancies per 1,000 women aged 15-19. We set 15 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Connecticut has achieved 90% of this objective.

#### Unintended Pregnancy Rate 7.5 / 10

41% of Connecticut's total pregnancies are unintended, compared to the objective of 30%. Thus, Connecticut has achieved 75% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Connecticut mandates HIV education, but it does not require that condoms be part of the curriculum.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 5 / 5

Connecticut requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Connecticut does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Connecticut has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Connecticut offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with incomes up to 263% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 5 / 5

Connecticut does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

Connecticut currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

Connecticut has not enacted TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Connecticut does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 5 / 5

5% of women in Connecticut live in a county without an abortion provider.





# DELAWARE

is one of 18 states receiving  
a “B” or higher

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Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## DELAWARE’S GRADE

**Delaware** received a “B” this year. Most notably, Delaware received high marks for:

**Delaware** has expanded their Medicaid program under the Affordable Care Act.

**Delaware** does not restrict coverage of abortion in private insurance plans.

**Delaware** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted

out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# DELAWARE

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# B- 72.7 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.8 / 10

Delaware has a teen pregnancy rate of 36 pregnancies per 1,000 women aged 15-19. We set 23 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Delaware has achieved 78.3% of the objective.

#### Unintended Pregnancy Rate 5.9 / 10

48% of Delaware's total pregnancies are unintended, compared to the objective of 30%. Thus, Delaware has achieved 59.1% of the target rate.

### PREVENTION

#### Sex Education 12 / 15

Delaware mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, as well as different methods of contraception.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Delaware does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Delaware does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Delaware has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Delaware currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 5 / 5

Delaware does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 8 / 10

Delaware requires parental notice before a minor may obtain an abortion. It also requires clinicians who perform medication abortion procedures to be licensed physicians.

#### TRAP Laws 5 / 5

Delaware has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Delaware does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 4 / 5

18% of women in Delaware live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# WASHINGTON, D.C.

is one of 18 states receiving  
a “B” or higher

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## WASHINGTON, D.C.’S GRADE

**Washington, D.C.** received a “B” this year. Most notably, Washington, D.C. received high marks for:

**Washington, D.C.** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, as well as different methods of contraception.

**Washington, D.C.** has expanded their Medicaid program under the Affordable Care Act.

**Washington, D.C.** currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

**Washington, D.C.** received a “plus” because they mandate their sex education program include information on sexual orientation and that it be inclusive. They also mandate the sex education program teach about consent.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# WASHINGTON, D.C.

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# B+ 81.6 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.7 / 10

Washington, D.C. has a teen pregnancy rate of 42 pregnancies per 1,000 women aged 15-19. We set 34 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that the Washington, D.C. has achieved 86.8% of the objective.

#### Unintended Pregnancy Rate 5.9 / 10

48% of Washington, D.C. total pregnancies are unintended, compared to the objective of 30%. Thus, Washington, D.C. has achieved 59.1% of the target rate.

### PREVENTION

#### Sex Education 12 / 15

Washington, D.C. mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, as well as different methods of contraception.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 5 / 5

Washington, D.C. requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Washington, D.C. explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Washington, D.C. has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Washington, D.C. currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 5 / 5

Washington, D.C. does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

Washington, D.C. currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

Washington, D.C. has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Washington, D.C. does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 5 / 5

0% of women in the Washington, D.C. live in a county without an abortion provider.

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**POPULATION  
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# FLORIDA

is one of 23 states receiving  
a failing grade

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## FLORIDA’S GRADE

**Florida** received an “F” this year. Most notably, Florida received poor marks for:

**Florida** mandates sex education in public schools, covering abstinence and HIV prevention, but does not require that HIV education include condoms or that sex education include contraception.

**Florida** has decided not to expand their Medicaid program under the Affordable Care Act.

**Florida** has enacted a series of TRAP laws which are targeted regulation of abortion

providers beyond what is necessary to ensure patient safety.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers,

including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.





# FLORIDA

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F 34.9 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8 / 10

Florida has a teen pregnancy rate of 35 pregnancies per 1,000 women aged 15-19. We set 23 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Florida has achieved 80% of the objective.

#### Unintended Pregnancy Rate 5.9 / 10

48% of Florida's total pregnancies are unintended, compared to the objective of 30%. Thus, Florida has achieved 59.1% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Florida mandates sex education in public schools, covering abstinence and HIV prevention, but does not require that HIV education include condoms or that sex education include contraception.

#### Nurses Authorized to Dispense Medications 5 / 5

Nurse Practitioners and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Florida does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Florida does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 5

Florida has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Florida offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver, is offered to people who have lost coverage for up to 2 years, but does not expand based on income.

#### Insurance Coverage of Abortion 5 / 5

Florida restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, or incest in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 7 / 10

Florida has the following laws, which make it unnecessarily difficult for someone to have an abortion: a mandatory ultrasound where the patient must be given an opportunity to view the image is required; parental consent and notice is required before a minor can obtain an abortion; and clinicians who perform medication abortion procedures are required to be licensed physicians.

#### TRAP Laws 0 / 5

Florida has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Florida does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 4 / 5

24% of women in Florida live in a county without an abortion provider.

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**POPULATION  
INSTITUTE**



# GEORGIA

is one of 23 states receiving  
a failing grade

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## GEORGIA’S GRADE

**Georgia** received an “F” this year. Most notably, Georgia received poor marks for:

**Georgia** mandates sex education in public schools, covering abstinence and HIV prevention, but does not require that HIV education include condoms or that sex education include contraception.

**Georgia** has decided not to expand their Medicaid program under the Affordable Care Act.

**Georgia** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks, the patient

must receive counseling 24 hours before an abortion procedure, which must include misinformation about fetal pain. Furthermore, parental notice is required, and clinicians who perform medication abortion procedures are required to be licensed physicians.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating

impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# GEORGIA

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F 44.3 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.8 / 10

Georgia has a teen pregnancy rate of 37 pregnancies per 1,000 women aged 15-19. We set 24 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Georgia has achieved 78% of the objective.

#### Unintended Pregnancy Rate 7.5 / 10

41% of Georgia's total pregnancies are unintended, compared to the objective of 30%. Thus, Georgia has achieved 75% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Georgia mandates sex education in public schools, covering abstinence and HIV prevention, but does not require that HIV education include condoms or that sex education include contraception.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Georgia does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Georgia explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

Georgia has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Georgia offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver, is offered to people with income levels up to 200% of the federal poverty line.

#### Insurance Coverage of Abortion 0 / 5

Georgia restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life or severe health impacts in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 2 / 10

Georgia has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks, the patient must receive counseling 24 hours before an abortion procedure, which must include misinformation about fetal pain. Furthermore, parental notice is required, and clinicians who perform medication abortion procedures are required to be licensed physicians.

#### TRAP Laws 5 / 5

Georgia has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Georgia does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 2 / 5

55% of women in Georgia live in a county without an abortion provider.

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A-

# HAWAII

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a “B” or higher



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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## HAWAII’S GRADE

**Hawaii** received an “A” this year. Most notably, Hawaii received high marks for:

**Hawaii** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception, and requires that the education be medically accurate.

**Hawaii** has expanded their Medicaid program under the Affordable Care Act.

**Hawaii** currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

**Hawaii** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households

a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.





# HAWAII

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# A- 86.6 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.2 / 10

Hawaii has a teen pregnancy rate of 33 pregnancies per 1,000 women aged 15-19. We set 22 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Hawaii has achieved 81.6% of the objective.

#### Unintended Pregnancy Rate 8.4 / 10

37% of Hawaii's total pregnancies are unintended, compared to the objective of 30%. Thus, Hawaii has achieved 84.1% of the target rate.

### PREVENTION

#### Sex Education 15 / 15

Hawaii mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception, and requires that the education be medically accurate.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 5 / 5

Hawaii requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Hawaii does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Hawaii has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Hawaii currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 5 / 5

Hawaii does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

Hawaii currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

Hawaii has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Hawaii does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 5 / 5

5% of women in Hawaii live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# IDAHO

is one of 27 states receiving  
a “D” or below

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## IDAHO’S GRADE

**Idaho** received an “D” this year. Most notably, Idaho received poor marks for:

**Idaho** does not mandate sex education in public schools.

**Idaho** does not require emergency rooms to provide information about emergency contra-ception and dispense it on request to sexual assault victims.

**Idaho** has policies in place that could ban abortion if Roe is struck down.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have

opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# IDAHO

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# D 54.1 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.3 / 10

Idaho has a teen pregnancy rate of 28 pregnancies per 1,000 women aged 15-19. We set 18 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Idaho has achieved 83.3% of this objective.

#### Unintended Pregnancy Rate 9.8 / 10

31% of Idaho's total pregnancies are unintended, compared to the objective of 30%. Thus, Idaho has achieved 97.7% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Idaho does not mandate sex education in public schools.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Idaho does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Idaho explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Idaho has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Idaho currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

Idaho restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, or incest in health insurance plans sold on the insurance exchanges and in cases of life in all private insurance plans.

### ACCESS

#### Abortion Restrictions 5 / 10

Idaho has the following laws, which make it unnecessarily difficult for someone to have an abortion: there is a mandatory waiting period of 24 hours between abortion counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians.

#### TRAP Laws 5 / 5

Idaho has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Idaho has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 1 / 5

67% of women in Idaho live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# ILLINOIS

is one of 18 states receiving  
a “B” or higher

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## ILLINOIS’S GRADE

**Illinois** received a “B” this year. Most notably, Illinois received high marks for:

**Illinois** requires HIV education with information on condoms in its sex education curriculum and requires that the education is medically accurate.

**Illinois** has expanded their Medicaid program under the Affordable Care Act.

**Illinois** Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted

family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.





# ILLINOIS

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# B 75.8 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.3 / 10

Illinois has a teen pregnancy rate of 32 pregnancies per 1,000 women aged 15-19. We set 22 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Illinois has achieved 83.3% of the objective.

#### Unintended Pregnancy Rate 7.5 / 10

41% of Illinois's total pregnancies are unintended, compared to the objective of 30%. Thus, Illinois has achieved 75% of the target rate.

### PREVENTION

#### Sex Education 8 / 15

Illinois requires HIV education with information on condoms in its sex education curriculum and requires that the education is medically accurate.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 5 / 5

Illinois requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Illinois does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Illinois has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Illinois currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 5 / 5

Illinois does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 9 / 10

Illinois requires parental notice before a minor may obtain an abortion.

#### TRAP Laws 5 / 5

Illinois has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Illinois does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 3 / 5

37% of women in Illinois live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# INDIANA

is one of 23 states receiving  
a failing grade

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## INDIANA’S GRADE

**Indiana** received an “F” this year. Most notably, Indiana received poor marks for:

**Indiana** mandates HIV education, but it does not require that condoms are part of the curriculum.

**Indiana** has the following laws, which make it unnecessarily difficult for someone to obtain an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on fetal pain; an ultrasound is required and the patient must be given an opportunity to view the image; there is a mandatory waiting period of 18 hours between abortion counseling and procedure; parental consent is required;

and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

**Indiana** received a “minus” because of a law that prevents abortion providers from receiving family planning funding.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them

to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# INDIANA

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F- 35.4 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8 / 10

Indiana has a teen pregnancy rate of 33 pregnancies per 1,000 women aged 15-19. We set 21 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Indiana has achieved 80% of this objective.

#### Unintended Pregnancy Rate 8.4 / 10

37% of Indiana's total pregnancies are unintended, compared to the objective of 30%. Thus, Indiana has achieved 84.1% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Indiana mandates HIV education, but it does not require that condoms are part of the curriculum.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 0 / 5

Indiana does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Indiana does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

Indiana has expanded their Medicaid program under the Affordable Care Act, but they have enacted harmful waivers such as work requirements and lock out penalties that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 5 / 5

Indiana offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with income levels up to 146% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 0 / 5

Indiana restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, incest or severe health impacts in all private health insurance plans including those sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 0 / 10

Indiana has the following laws, which make it unnecessarily difficult for someone to obtain an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on fetal pain; an ultrasound is required and the patient must be given an opportunity to view the image; there is a mandatory waiting period of 18 hours between abortion counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Indiana has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Indiana does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 1 / 5

70% of women in Indiana live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# IOWA

is one of 6 states  
receiving a “C”

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## IOWA’S GRADE

**Iowa** received a “C” this year. Most notably, Iowa received mixed marks for:

**Iowa** has expanded their Medicaid program under the Affordable Care Act, but they have enacted harmful waivers such as lock out penalties that limit the number of people who can use the expansion.

**Iowa** mandates sex education in public schools, covering abstinence and HIV prevention, but does not require that HIV education include condoms or that sex education include con-traception. However it does require that the education be medically accurate.

**Iowa** received a “minus” because of a law that prevents abortion providers from receiving family planning funding.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers,

including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# IOWA

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# C- 65.8 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.5 / 10

Iowa has a teen pregnancy rate of 25 pregnancies per 1,000 women aged 15-19. We set 16 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Iowa has achieved 85% of this objective.

#### Unintended Pregnancy Rate 9.3 / 10

33% of Iowa's total pregnancies are unintended, compared to the objective of 30%. Thus, Iowa has achieved 93.2% of the target rate.

### PREVENTION

#### Sex Education 3 / 15

Iowa mandates sex education in public schools, covering abstinence and HIV prevention, but does not require that HIV education include condoms or that sex education include contraception. However it does require that the education be medically accurate.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Iowa does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Iowa explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

Iowa has expanded their Medicaid program under the Affordable Care Act, but they have enacted harmful waivers such as lock out penalties that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 5 / 5

Iowa does not offer Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid, but they do have a state funded program. The state funded program is offered to people with income levels up to 300% of the federal poverty line.

#### Insurance Coverage of Abortion 5 / 5

Iowa does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 5 / 10

Iowa has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks, an ultrasound is required and the patient must be given an opportunity to view the image, requires parental notice and requires clinicians who perform medication abortion procedures to be licensed physicians.

#### TRAP Laws 5 / 5

Iowa has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Iowa does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 2 / 5

58% of women in Iowa live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# KANSAS

is one of 23 states receiving  
a failing grade

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## KANSAS’S GRADE

**Kansas** received an “F” this year. Most notably, Kansas received poor marks for:

**Kansas** mandates sex education in public schools, but does not require that sex education include condoms or contraception.

**Kansas** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on link to breast cancer, negative psychological effects, and fetal pain, an ultrasound is required and the patient must be given an opportunity to view the image; there is a mandatory

waiting period of 24 hours between counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# KANSAS

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F 28.4 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.3 / 10

Kansas has a teen pregnancy rate of 30 pregnancies per 1,000 women aged 15-19. We set 20 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Kansas has achieved 83.3% of this objective.

#### Unintended Pregnancy Rate 9.1 / 10

34% of Kansas's total pregnancies are unintended, compared to the objective of 30%. Thus, Kansas has achieved 90.9% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Kansas mandates sex education in public schools, but does not require that sex education include condoms or contraception.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 0 / 5

Kansas does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Kansas does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

Kansas has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Kansas currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

Kansas restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life endangerment in all private health insurance plans including those sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 0 / 10

Kansas has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on link to breast cancer, negative psychological effects, and fetal pain, an ultrasound is required and the patient must be given an opportunity to view the image; there is a mandatory waiting period of 24 hours between counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 5 / 5

Kansas has enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety, but they are temporarily enjoined pending court decisions.

#### Abortion Policy With Loss of Roe 5 / 5

Kansas does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 1 / 5

61% of women in Kansas live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



**POPULATION  
INSTITUTE**



# KENTUCKY

is one of 23 states receiving  
a failing grade

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## KENTUCKY’S GRADE

**Kentucky** received an “F” this year. Most notably, Kentucky received poor marks for:

**Kentucky** mandates sex education in public schools, covering abstinence and HIV prevention, but does not require that HIV education include condoms or that sex education include contraception.

**Kentucky** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; there is a mandatory waiting period of 24 hours between abortion counseling and the procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed

physicians in the presence of the patient which by extension bans telemedicine.

**Kentucky** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households

a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# KENTUCKY

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F- 33.6 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.5 / 10

Kentucky has a teen pregnancy rate of 41 pregnancies per 1,000 women aged 15-19. We set 26 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Kentucky has achieved 75% of the objective.

#### Unintended Pregnancy Rate 8.6 / 10

36% of Kentucky's total pregnancies are unintended, compared to the objective of 30%. Thus, Kentucky has achieved 86.4% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Kentucky mandates sex education in public schools, covering abstinence and HIV prevention, but does not require that HIV education include condoms or that sex education include contraception.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Kentucky does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 2.5 / 5

Kentucky explicitly allows all minors to consent to contraceptive services, however doctors may, but do not have to, inform the minor's parents.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

Kentucky has expanded their Medicaid program under the Affordable Care Act, but they have enacted harmful waivers such as work requirements and lock out penalties that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 0 / 5

Kentucky currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

Kentucky restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life endangerment in all private health insurance plans including those sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 2 / 10

Kentucky has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; there is a mandatory waiting period of 24 hours between abortion counseling and the procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Kentucky has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Kentucky has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 0 / 5

82% of women in Kentucky live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# LOUISIANA

is one of 23 states receiving  
a failing grade

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## LOUISIANA’S GRADE

**Louisiana** received an “F” this year. Most notably, Louisiana received poor marks for:

**Louisiana** does not mandate sex education in public schools.

**Louisiana** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on fetal pain and negative psychological effects; an ultrasound where the provider must display and describe the image; there is a mandatory waiting period of 24

hours between abortion counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them

to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# LOUISIANA

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F 34.6 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.2 / 10

Louisiana has a teen pregnancy rate of 44 pregnancies per 1,000 women aged 15-19. We set 27 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Louisiana has achieved 71.6% of the objective.

#### Unintended Pregnancy Rate 6.4 / 10

46% of Louisiana's total pregnancies are unintended, compared to the objective of 30%. Thus, Louisiana has achieved 63.6% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Louisiana does not mandate sex education in public schools.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Louisiana does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Louisiana does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Louisiana has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Louisiana offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver, is offered to people with an income level up to 138% of the federal poverty line. However, since the expansion of the Affordable Care Act would also cover people up to 138% of the poverty line Louisiana does not get points for their family planning expansion.

#### Insurance Coverage of Abortion 0 / 5

Louisiana restricts abortion coverage in private insurance plans by not allowing any abortion coverage in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 0 / 10

Louisiana has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on fetal pain and negative psychological effects; an ultrasound where the provider must display and describe the image; there is a mandatory waiting period of 24 hours between abortion counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Louisiana has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Louisiana has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 1 / 5

72% of women in Louisiana live in a county without an abortion provider.

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# MAINE

is one of 18 states receiving  
a “B” or higher

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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## MAINE’S GRADE

**Maine** received a “B” this year. Most notably, Maine received high marks for:

**Maine** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception, and requires that the education be medically accurate.

**Maine** has expanded their Medicaid program under the Affordable Care Act, but they have enacted harmful waivers such as work requirements and lock out penalties that limit the number of people who can use the expansion.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted

family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.





# MAINE

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# B 81.2 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.5 / 10

Maine has a teen pregnancy rate of 24 pregnancies per 1,000 women aged 15-19. We set 15 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Maine has achieved 85% of the objective.

#### Unintended Pregnancy Rate 8.2 / 10

38% of Maine's total pregnancies are unintended, compared to the objective of 30%. Thus, Maine has achieved 81.8% of the target rate.

### PREVENTION

#### Sex Education 15 / 15

Maine mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception, and requires that the education be medically accurate.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Maine does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 2.5 / 5

Maine explicitly allows all minors to consent to contraceptive services, however doctors may, but do not have to, inform the minor's parents.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

Maine has expanded their Medicaid program under the Affordable Care Act, but they have enacted harmful waivers such as work requirements and lock out penalties that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 5 / 5

Maine offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with income levels up to 214% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 5 / 5

Maine does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

Maine currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

Maine has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Maine does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 4 / 5

24% of women in Maine live in a county without an abortion provider.

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# MARYLAND

is one of 18 states receiving  
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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## MARYLAND’S GRADE

**Maryland** received a “B” this year. Most notably, Maryland received high marks for:

**Maryland** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception.

**Maryland** has expanded their Medicaid program under the Affordable Care Act.

**Maryland** does not restrict coverage of abortion in private insurance plans.

**Maryland** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households

a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# MARYLAND

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# B- 81.1 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8 / 10

Maryland has a teen pregnancy rate of 33 pregnancies per 1,000 women aged 15-19. We set 21 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Maryland has achieved 80% of the objective.

#### Unintended Pregnancy Rate 6.6 / 10

45% of Maryland's total pregnancies are unintended, compared to the objective of 30%. Thus, Maryland has achieved 65.9% of the target rate.

### PREVENTION

#### Sex Education 12 / 15

Maryland mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Maryland does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 2.5 / 5

Maryland explicitly allows all minors to consent to contraceptive services, however doctors may, but do not have to, inform the minor's parents.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Maryland has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Maryland offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with income levels up to 259% of the federal poverty line covering men and individuals under age 19.

#### Insurance Coverage of Abortion 5 / 5

Maryland does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 8 / 10

Maryland requires clinicians who perform medication abortion procedures to be licensed physicians and parental notice is required.

#### TRAP Laws 5 / 5

Maryland has not enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Maryland does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 4 / 5

29% of women in Maryland live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.

# B-

## MASSACHUSETTS

is one of 18 states receiving  
a “B” or higher

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

### METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

### MASSACHUSETTS’S GRADE

**Massachusetts** received a “B” this year. Most notably, Massachusetts received high marks for:

**Massachusetts** has expanded their Medicaid program under the Affordable Care Act.

**Massachusetts** does not restrict coverage of abortion in private insurance plans.

**Massachusetts** requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

**Massachusetts** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

### STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

### THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

#### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

#### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# MASSACHUSETTS

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# B- 71.2 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 9 / 10

Massachusetts has a teen pregnancy rate of 18 pregnancies per 1,000 women aged 15-19. We set 12 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Massachusetts has achieved 90% of the objective.

#### Unintended Pregnancy Rate 8.2 / 10

38% of Massachusetts's total pregnancies are unintended, compared to the objective of 30%. Thus, Massachusetts has achieved 81.8% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Massachusetts does not mandate sex education in public schools.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 5 / 5

Massachusetts requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Massachusetts explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Massachusetts has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Massachusetts currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 5 / 5

Massachusetts does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 9 / 10

Massachusetts requires parental consent before a minor can obtain an abortion.

#### TRAP Laws 5 / 5

Massachusetts has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Massachusetts does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 5 / 5

13% of women in Massachusetts live in a county without an abortion provider.

# MICHIGAN

is one of 23 states receiving  
a failing grade



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## MICHIGAN’S GRADE

**Michigan** received an “F” this year. Most notably, Michigan received poor marks for:

**Michigan** mandates HIV education, but it does not require that condoms are part of the curriculum.

**Michigan** has the following laws, which make it unnecessarily difficult for someone to have an abortion: the patient must undergo mandatory counseling including misinformation on negative psychological effects; there is a mandatory waiting period of 24 hours between abortion counseling and procedure; parental consent is required; and clinicians who perform

medication abortion procedures are required to be licensed physicians.

**Michigan** received a “minus” because of a law that prevents abortion providers from receiving family planning funding.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# MICHIGAN

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# F- 30.3 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.3 / 10

Michigan has a teen pregnancy rate of 30 pregnancies per 1,000 women aged 15-19. We set 20 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Michigan has achieved 83.3% of the objective.

#### Unintended Pregnancy Rate 7 / 10

43% of Michigan's total pregnancies are unintended, compared to the objective of 30%. Thus, Michigan has achieved 70.5% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Michigan mandates HIV education, but it does not require that condoms are part of the curriculum.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 0 / 5

Michigan does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Michigan does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

Michigan has expanded their Medicaid program under the Affordable Care Act but they have enacted harmful waivers such as work requirements and lock out penalties that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 0 / 5

Michigan currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

Michigan restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life endangerment in all private health insurance plans including those sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 4 / 10

Michigan has the following laws, which make it unnecessarily difficult for someone to have an abortion: the patient must undergo mandatory counseling including misinformation on negative psychological effects; there is a mandatory waiting period of 24 hours between abortion counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians.

#### TRAP Laws 0 / 5

Michigan has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Michigan has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 3 / 5

35% of women in Michigan live in a county without an abortion provider.

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# MINNESOTA

is one of 18 states receiving  
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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## MINNESOTA’S GRADE

**Minnesota** received a “B” this year. Most notably, Minnesota received high marks for:

**Minnesota** has expanded their Medicaid program under the Affordable Care Act.

**Minnesota** requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

**Minnesota** does not restrict coverage of abortion in private insurance plans.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have

opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

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# MINNESOTA

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# B 71.1 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.8 / 10

Minnesota has a teen pregnancy rate of 20 pregnancies per 1,000 women aged 15-19. We set 13 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Minnesota has achieved 88.3% of the objective.

#### Unintended Pregnancy Rate 9.8 / 10

31% of Minnesota's total pregnancies are unintended, compared to the objective of 30%. Thus, Minnesota has achieved 97.7% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Minnesota mandates sex education in public schools, covering abstinence and HIV prevention, but does not require that HIV education include condoms or that sex education include contraception.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 5 / 5

Minnesota requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 2.5 / 5

Minnesota explicitly allows all minors to consent to contraceptive services, however doctors may, but do not have to, inform the minor's parents.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Minnesota has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Minnesota offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with income levels up to 200% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 5 / 5

Minnesota does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 4 / 10

Minnesota has the following laws, which make it unnecessarily difficult for someone to have an abortion: the woman must undergo mandatory counseling including misinformation on fetal pain after 20 weeks; there is a mandatory waiting period of 24 hours between abortion counseling and procedure; notice of both parents is required; and clinicians who perform medication abortion procedures are required to be licensed physicians.

#### TRAP Laws 5 / 5

Minnesota has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Minnesota does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 1 / 5

61% of women in Minnesota live in a county without an abortion provider.

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# Mississippi

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## MISSISSIPPI’S GRADE

**Mississippi** received an “F” this year. Most notably, Mississippi received poor marks for:

**Mississippi** mandates sex education, but it does not require that contraception be part of the curriculum.

**Mississippi** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; patients must undergo mandatory counseling including misinformation on link to breast cancer; there is a mandatory waiting period of 24 hours between counseling and procedure with a mandatory ultrasound that the provider must offer the patient the opportunity to view; consent from both

parents is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

**Mississippi** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

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### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them

to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

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# MISSISSIPPI

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## BREAKDOWN OF SCORES

# F- 23.6 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.5 / 10

Mississippi has a teen pregnancy rate of 44 pregnancies per 1,000 women aged 15-19. We set 29 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Mississippi has achieved 75% of the objective.

#### Unintended Pregnancy Rate 6.1 / 10

47% of Mississippi's total pregnancies are unintended, compared to the objective of 30%. Thus, Mississippi has achieved 61.4% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Mississippi mandates sex education, but it does not require that contraception be part of the curriculum.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Mississippi does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Mississippi does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

Mississippi has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Mississippi offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver, is offered to people with income levels up to 199% of the federal poverty line, including men and individuals under age 19.

#### Insurance Coverage of Abortion 0 / 5

Mississippi restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, or incest in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 0 / 10

Mississippi has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; patients must undergo mandatory counseling including misinformation on link to breast cancer; there is a mandatory waiting period of 24 hours between counseling and procedure with a mandatory ultrasound that the provider must offer the patient the opportunity to view; consent from both parents is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Mississippi has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Mississippi has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 0 / 5

91% of women in Mississippi live in a county without an abortion provider.

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## MISSOURI’S GRADE

**Missouri** received an “F” this year. Most notably, Missouri received poor marks for:

**Missouri** voters approved an amendment to expand Medicaid, but the expansion does not go into effect until July 1, 2021.

**Missouri** has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

**Missouri** received a “minus” because of a law that prevents abortion providers from receiving family planning funding.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

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# MISSOURI

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F- 27.4 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8 / 10

Missouri has a teen pregnancy rate of 34 pregnancies per 1,000 women aged 15-19. We set 22 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Missouri has achieved 80% of the objective.

#### Unintended Pregnancy Rate 8.4 / 10

37% of Missouri's total pregnancies are unintended, compared to the objective of 30%. Thus, Missouri has achieved 84.1% of the target rate.

### PREVENTION

#### Sex Education 3 / 15

Missouri mandates HIV education, but it does not require that condoms be part of the curriculum, but does mandate it be medically accurate.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 0 / 5

Missouri does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Missouri does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

Missouri voters approved an amendment to expand Medicaid, but the expansion does not go into effect until July 1, 2021.

#### Medicaid Family Planning Expansions 5 / 5

Missouri does not offer Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid, but they do have a state funded program. The state funded program is offered to people with income levels up to 185% of the federal poverty line.

#### Insurance Coverage of Abortion 0 / 5

Missouri restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life endangerment in all private health insurance plans including those sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 3 / 10

Missouri has the following laws, which make it unnecessarily difficult for someone to have an abortion: the patient must undergo mandatory counseling including misinformation on fetal pain at 20 weeks; there is a mandatory waiting period of 72 hours between counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Missouri has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Missouri has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 2 / 5

78% of women in Missouri live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# MONTANA

is one of 6 states  
receiving a “C”

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## MONTANA’S GRADE

**Montana** received a “C” this year. Most notably, Montana received mixed marks for:

**Montana** has expanded their Medicaid program under the Affordable Care Act.

**Montana** currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

**Montana** mandates sex education and HIV education in public schools but it does not require that condoms or other forms of contraception be part of the curriculum.

**Montana** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# MONTANA

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# C- 70.9 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.8 / 10

Montana has a teen pregnancy rate of 34 pregnancies per 1,000 women aged 15-19. We set 21 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Montana has achieved 78.3% of the objective.

#### Unintended Pregnancy Rate 8.6 / 10

36% of Montana's total pregnancies are unintended, compared to the objective of 30%. Thus, Montana has achieved 86.4% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Montana mandates sex education and HIV education in public schools but it does not require that condoms or other forms of contraception be part of the curriculum.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Montana does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 2.5 / 5

Montana explicitly allows all minors to consent to contraceptive services, however doctors may, but do not have to, inform the minor's parents.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Montana has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Montana offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver, is offered to people with income levels up to 216% of the federal poverty.

#### Insurance Coverage of Abortion 5 / 5

Montana does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

Montana currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

Montana has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Montana does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 2 / 5

56% of women in Montana live in a county without an abortion provider.

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# NEBRASKA

is one of 23 states receiving  
a failing grade

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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## NEBRASKA’S GRADE

**Nebraska** received an “F” this year. Most notably, Nebraska received poor marks for:

**Nebraska** does not mandate sex education in public schools.

**Nebraska** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on negative psychological effects; there is a mandatory waiting period of 24 hours between counseling and procedure; parental consent is required;

and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# NEBRASKA

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# F 35.2 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.7 / 10

Nebraska has a teen pregnancy rate of 26 pregnancies per 1,000 women aged 15-19. We set 18 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Nebraska has achieved 86.6% of the objective.

#### Unintended Pregnancy Rate 9.5 / 10

32% of Nebraska's total pregnancies are unintended, compared to the objective of 30%. Thus, Nebraska has achieved 95.5% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Nebraska does not mandate sex education in public schools.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Nebraska does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Nebraska does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

Nebraska has expanded their Medicaid coverage under the Affordable Care Act, but they have enacted harmful waivers such as work requirements that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 0 / 5

Nebraska currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

Nebraska restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life endangerment in all private health insurance plans including those sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 1 / 10

Nebraska has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on negative psychological effects; there is a mandatory waiting period of 24 hours between counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Nebraska has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Nebraska does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 3 / 5

40% of women in Nebraska live in a county without an abortion provider.

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# NEVADA

is one of 6 states receiving a “C”

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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## NEVADA’S GRADE

**Nevada** received a “C” this year. Most notably, Nevada received mixed marks for:

**Nevada** has expanded their Medicaid program under the Affordable Care Act.

**Nevada** does mandate sex education and HIV education in public schools, but it sets no requirement to teach about condoms and contraception.

**Nevada** does not restrict coverage of abortion in private insurance plans.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers,

including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# NEVADA

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# C 63.8 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.5 / 10

Nevada has a teen pregnancy rate of 40 pregnancies per 1,000 women aged 15-19. We set 25 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Nevada has achieved 75% of the objective.

#### Unintended Pregnancy Rate 7.3 / 10

42% of Nevada's total pregnancies are unintended, compared to the objective of 30%. Thus, Nevada has achieved 72.7% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Nevada does mandate sex education and HIV education in public schools, but it sets no requirement to teach about condoms and contraception.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Nevada does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Nevada does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Nevada has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Nevada currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 5 / 5

Nevada does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 9 / 10

Nevada requires clinicians who perform medication abortion procedures to be licensed physicians.

#### TRAP Laws 5 / 5

Nevada has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Nevada does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 5 / 5

9% of women in Nevada live in a county without an abortion provider.

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# NEW HAMPSHIRE

is one of 6 states receiving a “C”

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## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## NEW HAMPSHIRE ’S GRADE

**New Hampshire** received a “C” this year. Most notably, New Hampshire received mixed marks for:

**New Hampshire** has expanded their Medicaid program under the Affordable Care Act, but they have enacted harmful waivers such as work requirements that limit the number of people who can use the expansion.

**New Hampshire** mandates sex education and HIV education, but it does not require that condoms or birth control be part of the curriculum.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers,

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### Federal Courts

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# NEW HAMPSHIRE

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## BREAKDOWN OF SCORES

# C 62.8 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.8 / 10

New Hampshire has a teen pregnancy rate of 18 pregnancies per 1,000 women aged 15-19. We set 11 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that New Hampshire has achieved 88.3% of the objective.

#### Unintended Pregnancy Rate 8 / 10

39% of New Hampshire's total pregnancies are unintended, compared to the objective of 30%. Thus, New Hampshire has achieved 79.5% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

New Hampshire mandates sex education & HIV education, but it does not require that condoms or birth control be part of the curriculum.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

New Hampshire does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

New Hampshire does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

New Hampshire has expanded their Medicaid program under the Affordable Care Act, but they have enacted harmful waivers such as work requirements that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 5 / 5

New Hampshire offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with income levels up to 201% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 5 / 5

New Hampshire does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 9 / 10

New Hampshire requires parental notice before a minor may obtain an abortion.

#### TRAP Laws 5 / 5

New Hampshire has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

New Hampshire does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 4 / 5

30% of women in New Hampshire live in a county without an abortion provider.

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# NEW JERSEY

is one of 18 states receiving  
a “B” or higher

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## NEW JERSEY’S GRADE

**New Jersey** received an “A” this year. Most notably, New Jersey received high marks for:

**New Jersey** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception. New Jersey also requires the education be medically accurate.

**New Jersey** expanded their Medicaid program under the Affordable Care Act.

**New Jersey** has no laws that make it unnecessarily difficult for someone to have an abortion.

**New Jersey** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# NEW JERSEY

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# A- 87.9 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.8 / 10

New Jersey has a teen pregnancy rate of 31 pregnancies per 1,000 women aged 15-19. We set 18 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that New Jersey has achieved 78.3% of the objective.

#### Unintended Pregnancy Rate 6.1 / 10

47% of New Jersey's total pregnancies are unintended, compared to the objective of 30%. Thus, New Jersey has achieved 61.4% of the target rate.

### PREVENTION

#### Sex Education 15 / 15

New Jersey mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception. New Jersey also requires the education be medically accurate.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 5 / 5

New Jersey requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

New Jersey does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

New Jersey has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

New Jersey offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with income levels up to 205% of the federal poverty line. The family planning expansion is also extended to include men.

#### Insurance Coverage of Abortion 5 / 5

New Jersey does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

New Jersey has no laws that make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

New Jersey has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

New Jersey does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 4 / 5

26% of women in New Jersey live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# NEW MEXICO

is one of 18 states receiving  
a “B” or higher

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## NEW MEXICO’S GRADE

**New Mexico** received a “B” this year. Most notably, New Mexico received high marks for:

**New Mexico** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception.

**New Mexico** has expanded their Medicaid program under the Affordable Care Act but they have enacted harmful waivers such as lock out penalties that limit the number of people who can use the expansion.

**New Mexico** currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

**New Mexico** received a “plus” because they mandate their sex education program include information on sexual orientation and that it be inclusive.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have

opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# NEW MEXICO

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# B+ 77.8 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.7 / 10

New Mexico has a teen pregnancy rate of 45 pregnancies per 1,000 women aged 15-19. We set 31 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that New Mexico has achieved 76.6% of the objective.

#### Unintended Pregnancy Rate 8.2 / 10

38% of New Mexico's total pregnancies are unintended, compared to the objective of 30%. Thus, New Mexico has achieved 81.8% of the target rate.

### PREVENTION

#### Sex Education 12 / 15

New Mexico mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 5 / 5

New Mexico requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

New Mexico explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

New Mexico has expanded their Medicaid program under the Affordable Care Act but they have enacted harmful waivers such as lock out penalties that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 5 / 5

New Mexico offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with income levels up to 255% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 5 / 5

New Mexico does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

New Mexico currently does not have laws enacted that make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

New Mexico has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

New Mexico has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 2 / 5

48% of women in New Mexico live in a county without an abortion provider.

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A special thanks to the Guttmacher Institute whose research made this report card possible.

B

# NEW YORK

is one of 18 states receiving  
a “B” or higher

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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## NEW YORK’S GRADE

**New York** received a “B” this year. Most notably, New York received high marks for:

**New York** has expanded their Medicaid program under the Affordable Care Act.

**New York** requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

**New York** does not have any laws which make it unnecessarily difficult for someone to have an abortion.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new

restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# NEW YORK

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# B 79.1 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8 / 10

New York has a teen pregnancy rate of 35 pregnancies per 1,000 women aged 15-19. We set 23 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that New York has achieved 80% of the objective.

#### Unintended Pregnancy Rate 6.1 / 10

47% of New York's total pregnancies are unintended, compared to the objective of 30%. Thus, New York has achieved 61.4% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

New York requires HIV education, but does not include information on condoms in its HIV education curriculum.

#### Nurses Authorized to Dispense Medications 5 / 5

Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 5 / 5

New York requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

New York explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

New York has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

New York offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with income levels up to 223% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 5 / 5

New York does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

New York does not have any laws which make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

New York has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

New York does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 5 / 5

8% of women in New York live in a county without an abortion provider.

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A special thanks to the Guttmacher Institute whose research made this report card possible.



**POPULATION  
INSTITUTE**

D-

# NORTH CAROLINA

is one of 27 states receiving  
a “D” or below

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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## NORTH CAROLINA’S GRADE

**North Carolina** received an “D” this year. Most notably, North Carolina received poor marks for:

**North Carolina** has decided not to expand their Medicaid program under the Affordable Care Act.

**North Carolina** does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

**North Carolina** has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

**North Carolina** received a “minus” because of a law that prevents abortion providers from receiving family planning funding.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have

opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# NORTH CAROLINA

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# D- 54.2 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.2 / 10

North Carolina has a teen pregnancy rate of 33 pregnancies per 1,000 women aged 15-19. We set 22 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that North Carolina has achieved 81.6% of the objective.

#### Unintended Pregnancy Rate 7 / 10

43% of North Carolina's total pregnancies are unintended, compared to the objective of 30%. Thus, North Carolina has achieved 70.5% of the target rate.

### PREVENTION

#### Sex Education 15 / 15

North Carolina mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception. North Carolina also requires that the education be medically accurate.

#### Nurses Authorized to Dispense Medications 5 / 5

Nurse Practitioners and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

North Carolina does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

North Carolina explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

North Carolina has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

North Carolina offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment is offered to people with income levels up to 200% of the federal poverty line. North Carolina also expands to the coverage to include men and individuals under 19 years old.

#### Insurance Coverage of Abortion 0 / 5

North Carolina restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, or incest in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 2 / 10

North Carolina has the following laws, which make it unnecessarily difficult for someone to have an abortion: the patient must undergo mandatory counseling including misinformation on negative psychological effects; there is a mandatory waiting period of 72 hours between counseling and procedure with a mandatory ultrasound; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

North Carolina has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

North Carolina does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 2 / 5

53% of women in North Carolina live in a county without an abortion provider.

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# NORTH DAKOTA

is one of 23 states receiving  
a failing grade

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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## NORTH DAKOTA’S GRADE

**North Dakota** received an “F” this year. Most notably, North Dakota received poor marks for:

**North Dakota** mandates sex education and HIV education in public schools but it sets no requirement to teach about condoms and contraception.

**North Dakota** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; there is a mandatory waiting period of 24 hours between counseling and procedure; parental consent from both parents is required; and clinicians who perform medication abortion procedures are required to be licensed

physicians in the presence of the patient which by extension bans telemedicine.

**North Dakota** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

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# NORTH DAKOTA

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# F- 40.3 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8 / 10

North Dakota has a teen pregnancy rate of 29 pregnancies per 1,000 women aged 15-19. We set 17 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that North Dakota has achieved 80% of the objective.

#### Unintended Pregnancy Rate 9.3 / 10

33% of North Dakota's total pregnancies are unintended, compared to the objective of 30%. Thus, North Dakota has achieved 93.2% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

North Dakota mandates sex education & HIV education in public schools but it sets no requirement to teach about condoms and contraception.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

North Dakota does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

North Dakota does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

North Dakota has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

North Dakota currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

North Dakota restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life endangerment in all private health insurance plans including those sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 2 / 10

North Dakota has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; there is a mandatory waiting period of 24 hours between counseling and procedure; parental consent from both parents is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

North Dakota has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

North Dakota has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 1 / 5

72% of women in North Dakota live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# OHIO

is one of 23 states receiving  
a failing grade

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## OHIO’S GRADE

Ohio received an “F” this year. Most notably, Ohio received poor marks for:

Ohio does mandate sex education and HIV education in public schools, but it sets no requirement to teach about condoms and contraception.

Ohio has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; there is a mandatory waiting period of 24 hours between counseling and procedure with a mandatory ultrasound that the provider must offer the patient the opportunity to view; parental consent is required; and clinicians who perform

medication abortion procedures are required to be licensed physicians.

Ohio received a “minus” because of a law that prevents abortion providers from receiving family planning funding.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.





# OHIO

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F- 37 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.2 / 10

Ohio has a teen pregnancy rate of 32 pregnancies per 1,000 women aged 15-19. We set 21 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Ohio has achieved 81.6% of the objective.

#### Unintended Pregnancy Rate 6.8 / 10

44% of Ohio's total pregnancies are unintended, compared to the objective of 30%. Thus, Ohio has achieved 68.2% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Ohio does mandate sex education and HIV education in public schools, but it sets no requirement to teach about condoms and contraception.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 5 / 5

Ohio requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Ohio does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

Ohio has expanded their Medicaid program under the Affordable Care Act but they have enacted harmful waivers such as work requirements that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 0 / 5

Ohio currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

Ohio restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, or incest in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 2 / 10

Ohio has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; there is a mandatory waiting period of 24 hours between counseling and procedure with a mandatory ultrasound that the provider must offer the patient the opportunity to view; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians.

#### TRAP Laws 0 / 5

Ohio has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Ohio does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 2 / 5

55% of women in Ohio live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

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# OKLAHOMA

is one of 23 states receiving  
a failing grade

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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## OKLAHOMA’S GRADE

**Oklahoma** received an “F” this year. Most notably, Oklahoma received poor marks for:

**Oklahoma** voters voted to expand Medicaid, but the expansion does not go into effect until July 1, 2021.

**Oklahoma** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on link to breast cancer and fetal pain; there is a mandatory waiting period of 72 hours between counseling and procedure with a mandatory ultrasound;

parental consent and notice is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# OKLAHOMA

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F 25.5 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.5 / 10

Oklahoma has a teen pregnancy rate of 44 pregnancies per 1,000 women aged 15-19. We set 29 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Oklahoma has achieved 75% of the objective.

#### Unintended Pregnancy Rate 8 / 10

39% of Oklahoma's total pregnancies are unintended, compared to the objective of 30%. Thus, Oklahoma has achieved 79.5% of the target rate.

### PREVENTION

#### Sex Education 8 / 15

Oklahoma requires HIV education with information on condoms in its sex education curriculum, but not other methods of contraception. They also require it to be medically accurate.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 0 / 5

Oklahoma does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Oklahoma does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

Oklahoma voters voted to expand Medicaid, but the expansion does not go into effect until July 1, 2021.

#### Medicaid Family Planning Expansions 0 / 5

Oklahoma offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver, is offered to people with an income level up to 138% of the federal poverty line. However, since the expansion of the Affordable Care Act would also cover people up to 138% of the poverty line Oklahoma does not get points for their family planning expansion.

#### Insurance Coverage of Abortion 0 / 5

Oklahoma restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life endangerment in all private health insurance plans including those sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 0 / 10

Oklahoma has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on link to breast cancer and fetal pain; there is a mandatory waiting period of 72 hours between counseling and procedure with a mandatory ultrasound; parental consent and notice is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Oklahoma has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Oklahoma has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 2 / 5

53% of women in Oklahoma live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# OREGON

is one of 18 states receiving  
a “B” or higher

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## OREGON’S GRADE

**Oregon** received an “A” this year. Most notably, Oregon received high marks for:

**Oregon** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception. Oregon also requires that the education be medically accurate.

**Oregon** has no laws that make it unnecessarily difficult for someone to have an abortion.

**Oregon** has expanded their Medicaid program under the Affordable Care Act.

**Oregon** received a “plus” because they mandate their sex education program include information on sexual orientation and that it be inclusive.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# OREGON

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# A+ 93.4 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.3 / 10

Oregon has a teen pregnancy rate of 28 pregnancies per 1,000 women aged 15-19. We set 18 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Oregon has achieved 83.3% of the objective.

#### Unintended Pregnancy Rate 8.6 / 10

36% of Oregon's total pregnancies are unintended, compared to the objective of 30%. Thus, Oregon has achieved 86.4% of the target rate.

### PREVENTION

#### Sex Education 15 / 15

Oregon mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception. Oregon also requires that the education be medically accurate.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 5 / 5

Oregon requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 2.5 / 5

Oregon explicitly allows all minors to consent to contraceptive services, however doctors may, but do not have to, inform the minor's parents.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Oregon has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Oregon offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver, is offered to people with income levels up to 250% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 5 / 5

Oregon does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

Oregon has no laws that make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

Oregon has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Oregon does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 4 / 5

23% of women in Oregon live in a county without an abortion provider.

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# PENNSYLVANIA

is one of 27 states receiving  
a “D” or below

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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## PENNSYLVANIA’S GRADE

**Pennsylvania** received an “D” this year. Most notably, Pennsylvania received poor marks for:

**Pennsylvania** mandates HIV education, but it does not require that condoms be part of the curriculum.

**Pennsylvania** has the following laws, which make it unnecessarily difficult for someone to have an abortion: there is a mandatory waiting period of 24 hours between counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians.

**Pennsylvania** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers,

including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# PENNSYLVANIA

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# D- 60.7 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.5 / 10

Pennsylvania has a teen pregnancy rate of 27 pregnancies per 1,000 women aged 15-19. We set 18 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Pennsylvania has achieved 85% of the objective.

#### Unintended Pregnancy Rate 7.7 / 10

40% of Pennsylvania's total pregnancies are unintended, compared to the objective of 30%. Thus, Pennsylvania has achieved 77.3% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Pennsylvania mandates HIV education, but it does not require that condoms be part of the curriculum.

#### Nurses Authorized to Dispense Medications 5 / 5

Nurse Practitioners and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 2.5 / 5

Pennsylvania requires emergency rooms to provide information about emergency contraception, but does not require they dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Pennsylvania explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Pennsylvania has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Pennsylvania offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment is offered to people with income levels up to 220% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 0 / 5

Pennsylvania restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, or incest in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 5 / 10

Pennsylvania has the following laws, which make it unnecessarily difficult for someone to have an abortion: there is a mandatory waiting period of 24 hours between counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians.

#### TRAP Laws 0 / 5

Pennsylvania has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Pennsylvania does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 2 / 5

48% of women in Pennsylvania live in a county without an abortion provider.

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# RHODE ISLAND

is one of 18 states receiving  
a “B” or higher

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## RHODE ISLAND’S GRADE

**Rhode Island** received a “B” this year. Most notably, Rhode Island received high marks for:

**Rhode Island** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception. Rhode Island also requires that sex education be medically accurate.

**Rhode Island** has expanded their Medicaid program under the Affordable Care Act.

**Rhode Island** does not restrict coverage of abortion in private insurance plans.

**Rhode Island** received a “plus” because they mandate their sex education program include information on sexual orientation and that it be inclusive.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households

a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.





# RHODE ISLAND

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# B+ 74.2 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.5 / 10

Rhode Island has a teen pregnancy rate of 25 pregnancies per 1,000 women aged 15-19. We set 16 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Rhode Island has achieved 85% of the objective.

#### Unintended Pregnancy Rate 7.7 / 10

40% of Rhode Island's total pregnancies are unintended, compared to the objective of 30%. Thus, Rhode Island has achieved 77.3% of the target rate.

### PREVENTION

#### Sex Education 15 / 15

Rhode Island mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception. Rhode Island also requires that sex education be medically accurate.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists and Nurse Practitioners are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Rhode Island does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Rhode Island does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Rhode Island has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Rhode Island offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver, is offered to those with loss of coverage postpartum, but does not expand based on income.

#### Insurance Coverage of Abortion 5 / 5

Rhode Island does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 9 / 10

Rhode Island requires parental consent to obtain before a minor may obtain an abortion.

#### TRAP Laws 0 / 5

Rhode Island has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Rhode Island does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 4 / 5

22% of women in Rhode Island live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



**POPULATION  
INSTITUTE**

# SOUTH CAROLINA

is one of 23 states receiving  
a failing grade



**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## SOUTH CAROLINA’S GRADE

**South Carolina** received an “F” this year. Most notably, South Carolina received poor marks for:

**South Carolina** has decided not to expand their Medicaid program under the Affordable Care Act.

**South Carolina** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks, there is a mandatory waiting period of 24 hours between counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed

physicians in the presence of the patient which by extension bans telemedicine.

**South Carolina** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating

impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# SOUTH CAROLINA

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F- 42.1 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8 / 10

South Carolina has a teen pregnancy rate of 36 pregnancies per 1,000 women aged 15-19. We set 24 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that South Carolina has achieved 80% of the objective.

#### Unintended Pregnancy Rate 6.6 / 10

45% of South Carolina's total pregnancies are unintended, compared to the objective of 30%. Thus, South Carolina has achieved 65.9% of the target rate.

### PREVENTION

#### Sex Education 12 / 15

South Carolina mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 2.5 / 5

South Carolina does not require emergency rooms to provide information about emergency contraception, but it does require they dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

South Carolina does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 5

South Carolina has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

South Carolina offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with income levels up to 199% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 0 / 5

South Carolina restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, or incest in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 2 / 10

South Carolina has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks, there is a mandatory waiting period of 24 hours between counseling and procedure; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

South Carolina has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

South Carolina does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 1 / 5

71% of women in South Carolina live in a county without an abortion provider.

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# SOUTH DAKOTA

is one of 23 states receiving  
a failing grade

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## SOUTH DAKOTA’S GRADE

**South Dakota** received an “F” this year. Most notably, South Dakota received poor marks for:

**South Dakota** does not mandate sex education in public schools.

**South Dakota** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on fetal pain and negative psychological effects; there is a mandatory waiting period of 72 hours between counseling and procedure; parental notice is required; and clinicians who perform

medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

**South Dakota** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them

to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# SOUTH DAKOTA

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F- 22.6 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.7 / 10

South Dakota has a teen pregnancy rate of 33 pregnancies per 1,000 women aged 15-19. We set 19 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that South Dakota has achieved 76.6% the objective.

#### Unintended Pregnancy Rate 8.9 / 10

35% of South Dakota's total pregnancies are unintended, compared to the objective of 30%. Thus, South Dakota has achieved 88.6% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

South Dakota does not mandate sex education in public schools.

#### Nurses Authorized to Dispense Medications 5 / 5

Nurse Practitioners and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

South Dakota does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

South Dakota does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

South Dakota has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

South Dakota currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

South Dakota restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life and severe health impacts in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 1 / 10

South Dakota has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on fetal pain and negative psychological effects; there is a mandatory waiting period of 72 hours between counseling and procedure; parental notice is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

South Dakota has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

South Dakota has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 0 / 5

76% of women in South Dakota live in a county without an abortion provider.

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# TENNESSEE

is one of 23 states receiving  
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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## TENNESSEE’S GRADE

Tennessee received an “F” this year. Most notably, Tennessee received poor marks for:

Tennessee does mandate sex education and HIV education in public schools, but it sets no requirement to teach about condoms and contraception. They do mandate that the sex and HIV education be medically accurate.

Tennessee has decided not to expand their Medicaid program under the Affordable Care Act.

Tennessee a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# TENNESSEE

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# F- 39.3 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.7 / 10

Tennessee has a teen pregnancy rate of 39 pregnancies per 1,000 women aged 15-19. We set 25 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Tennessee has achieved 76.6% of the objective.

#### Unintended Pregnancy Rate 6.6 / 10

45% of Tennessee's total pregnancies are unintended, compared to the objective of 30%. Thus, Tennessee has achieved 65.9% of the target rate.

### PREVENTION

#### Sex Education 3 / 15

Tennessee does mandate sex education and HIV education in public schools, but it sets no requirement to teach about condoms and contraception. They do mandate that the sex and HIV education be medically accurate.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Tennessee does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Tennessee explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

Tennessee has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Tennessee currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

Tennessee restricts abortion coverage in private insurance plans by not allowing any abortion coverage in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 6 / 10

Tennessee has the following laws, which make it unnecessarily difficult for someone to have an abortion: a patient must get an ultrasound where the provider is required to show and describe the image; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 5 / 5

Tennessee has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety, but they have been permanently enjoined by the courts.

#### Abortion Policy With Loss of Roe 0 / 5

Tennessee has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 1 / 5

63% of women in Tennessee live in a county without an abortion provider.

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# TEXAS

is one of 23 states receiving  
a failing grade

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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## TEXAS’S GRADE

Texas received an “F” this year. Most notably, Texas received poor marks for:

Texas has decided not to expand their Medicaid program under the Affordable Care Act.

Texas has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on link to breast cancer, fetal pain, negative psychological effects, and get an ultrasound where the provider is required to show and describe the image; there is a mandatory waiting period of 24 hours between counseling and procedure;

parental consent and notice is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

Texas received a “minus” because of a law that prevents abortion providers from receiving family planning funding.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them

to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

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# TEXAS

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# F- 42.5 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.7 / 10

Texas has a teen pregnancy rate of 43 pregnancies per 1,000 women aged 15-19. We set 29 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Texas has achieved 76.6% of the objective.

#### Unintended Pregnancy Rate 7.3 / 10

42% of Texas's total pregnancies are unintended, compared to the objective of 30%. Thus, Texas has achieved 72.7% of the target rate.

### PREVENTION

#### Sex Education 12 / 15

Texas mandates sex education in public schools, covering abstinence and HIV prevention, and requires that sex education and HIV education include condoms and birth control.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 2.5 / 5

Texas requires emergency rooms to provide information about emergency contraception, but does not require they dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Texas does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

Texas has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Texas offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver is offered to people with income levels up to 200% of the federal poverty line.

#### Insurance Coverage of Abortion 0 / 5

Texas restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life endangerment or severe health impacts in all private health insurance plans including those sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 0 / 10

Texas has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on link to breast cancer, fetal pain, negative psychological effects, and get an ultrasound where the provider is required to show and describe the image; there is a mandatory waiting period of 24 hours between counseling and procedure; parental consent and notice is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Texas has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Texas does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 3 / 5

43% of women in Texas live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# UTAH

is one of 23 states receiving  
a failing grade

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## UTAH’S GRADE

**Utah** received an “F” this year. Most notably, Utah received poor marks for:

**Utah** does mandate sex education and HIV education in public schools, but it sets no requirement to teach about condoms and contraception. However, Utah does require it to be medically accurate.

**Utah** has the following laws, which make it unnecessarily difficult for someone to have an abortion: the patient must undergo mandatory counseling including misinformation on fetal pain at 20 weeks; there is a mandatory waiting period of 72 hours between counseling and procedure;

parental consent and notice is required; and clinicians who perform medication abortion procedures are required to be licensed physicians.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households

a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# UTAH

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F 39.7 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.7 / 10

Utah has a teen pregnancy rate of 22 pregnancies per 1,000 women aged 15-19. We set 14 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Utah has achieved 86.6% of the objective.

#### Unintended Pregnancy Rate 10 / 10

26% of Utah's total pregnancies are unintended, compared to the objective of 30%. Thus, Utah has achieved the target rate.

### PREVENTION

#### Sex Education 3 / 15

Utah does mandate sex education and HIV education in public schools, but it sets no requirement to teach about condoms and contraception. However, Utah does require it to be medically accurate.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 5 / 5

Utah requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Utah does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 8 / 15

Utah has expanded their Medicaid program under the Affordable Care Act but they have enacted harmful waivers such as work requirements that limit the number of people who can use the expansion.

#### Medicaid Family Planning Expansions 0 / 5

Utah currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 0 / 5

Utah restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, incest, severe health, and fetal impairment in all private health insurance plans including those sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 4 / 10

Utah has the following laws, which make it unnecessarily difficult for someone to have an abortion: the patient must undergo mandatory counseling including misinformation on fetal pain at 20 weeks; there is a mandatory waiting period of 72 hours between counseling and procedure; parental consent and notice is required; and clinicians who perform medication abortion procedures are required to be licensed physicians.

#### TRAP Laws 0 / 5

Utah has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Utah has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 1 / 5

63% of women in Utah live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

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# VERMONT

is one of 18 states receiving  
a “B” or higher

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

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## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## VERMONT’S GRADE

**Vermont** received a “B” this year. Most notably, Vermont received high marks for:

**Vermont** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception.

**Vermont** has expanded their Medicaid program under the Affordable Care Act.

**Vermont** has no laws that make it unnecessarily difficult for someone to have an abortion.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have

opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.





# VERMONT

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# B 78.1 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 9 / 10

Vermont has a teen pregnancy rate of 20 pregnancies per 1,000 women aged 15-19. We set 14 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Vermont has achieved 90% the objective.

#### Unintended Pregnancy Rate 9.1 / 10

34% of Vermont's total pregnancies are unintended, compared to the objective of 30%. Thus, Vermont has achieved 90.9% of the target rate.

### PREVENTION

#### Sex Education 12 / 15

Vermont mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 0 / 5

Vermont does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Vermont does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Vermont has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Vermont does not offer Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid, but they do have a state funded program. The state funded program is offered to people with income levels up to 200% of the federal poverty line.

#### Insurance Coverage of Abortion 5 / 5

Vermont does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

Vermont has no laws that make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

Vermont has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Vermont does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 3 / 5

38% of women in Vermont live in a county without an abortion provider.

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# VIRGINIA

is one of 18 states receiving  
a “B” or higher

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## VIRGINIA’S GRADE

**Virginia** received a “B” this year. Most notably, Virginia received high marks for:

**Virginia** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception. They also require that it be medically accurate.

**Virginia** has expanded their Medicaid program under the Affordable Care Act.

**Virginia** explicitly allows all minors to consent to contraceptive services.

**Virginia** received a “minus” because their ‘Choose Life’ license plates fund anti-choice organizations/Crisis Pregnancy Centers.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households

a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# VIRGINIA

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# B- 78.4 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.7 / 10

Virginia has a teen pregnancy rate of 26 pregnancies per 1,000 women aged 15-19. We set 18 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Virginia has achieved 86.6% of the objective.

#### Unintended Pregnancy Rate 8.2 / 10

38% of Virginia's total pregnancies are unintended, compared to the objective of 30%. Thus, Virginia has achieved 81.8% of the target rate.

### PREVENTION

#### Sex Education 15 / 15

Virginia mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception. They also require that it be medically accurate.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 2.5 / 5

Virginia requires emergency rooms to provide information about emergency contraception, but it does not require they dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Virginia explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Virginia has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Virginia offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with an income level up to 205% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 0 / 5

Virginia restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, or incest in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 9 / 10

Virginia requires parental consent and notice to obtain before a minor may obtain an abortion.

#### TRAP Laws 5 / 5

Virginia has not enacted TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Virginia does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 0 / 5

80% of women in Virginia live in a county without an abortion provider.

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**POPULATION  
INSTITUTE**



# WASHINGTON

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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## WASHINGTON’S GRADE

**Washington** received an “A” this year. Most notably, Washington received high marks for:

**Washington** mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception. They also require that it be medically accurate.

**Washington** has expanded their Medicaid program under the Affordable Care Act.

**Washington** has no laws that make it unnecessarily difficult for someone to have an abortion.

**Washington** received a “plus” because they mandate their sex education program include information on sexual orientation and that it be inclusive.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family

planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.



# WASHINGTON

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# A+ 92.4 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.3 / 10

Washington has a teen pregnancy rate of 29 pregnancies per 1,000 women aged 15-19. We set 19 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Washington has achieved 83.3% of the objective.

#### Unintended Pregnancy Rate 9.1 / 10

34% of Washington's total pregnancies are unintended, compared to the objective of 30%. Thus, Washington has achieved 90.9% of the target rate.

### PREVENTION

#### Sex Education 15 / 15

Washington mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception. They also require that it be medically accurate.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 5 / 5

Washington requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Washington explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

Washington has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Washington offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver, is offered to people with income levels up to 260% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 5 / 5

Washington does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 10 / 10

Washington has no laws that make it unnecessarily difficult for someone to have an abortion.

#### TRAP Laws 5 / 5

Washington has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Washington does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 5 / 5

10% of women in Washington live in a county without an abortion provider.

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D

# WEST VIRGINIA

is one of 27 states receiving  
a “D” or below

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## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## WEST VIRGINIA’S GRADE

**West Virginia** received an “D” this year. Most notably, West Virginia received poor marks for:

**West Virginia** does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

**West Virginia** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on negative psychological effects; there is a mandatory waiting

period of 24 hours between counseling and procedure; parental notice is required; and clinicians who perform medication abortion procedures are required to be in the presence of the patient which by extension bans telemedicine.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating

impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.

# WEST VIRGINIA

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# D 55 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.8 / 10

West Virginia has a teen pregnancy rate of 40 pregnancies per 1,000 women aged 15-19. We set 27 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that West Virginia has achieved 78.3% of the objective.

#### Unintended Pregnancy Rate 8.2 / 10

38% of West Virginia's total pregnancies are unintended, compared to the objective of 30%. Thus, West Virginia has achieved 81.8% of the target rate.

### PREVENTION

#### Sex Education 12 / 15

West Virginia mandates comprehensive sex education in public schools, covering abstinence, HIV prevention, and different methods of contraception.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 0 / 5

West Virginia does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

West Virginia does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 15 / 15

West Virginia has expanded their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

West Virginia currently does not offer an expansion for family planning services to the Medicaid plan.

#### Insurance Coverage of Abortion 5 / 5

West Virginia does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 2 / 10

West Virginia has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; the patient must undergo mandatory counseling including misinformation on negative psychological effects; there is a mandatory waiting period of 24 hours between counseling and procedure; parental notice is required; and clinicians who perform medication abortion procedures are required to be in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 5 / 5

West Virginia has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

West Virginia has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 0 / 5

90% of women in West Virginia live in a county without an abortion provider.

For the complete report card and additional information, please visit: [www.populationinstitute.org/reportcard](http://www.populationinstitute.org/reportcard)

A special thanks to the Guttmacher Institute whose research made this report card possible.



# WISCONSIN

is one of 23 states receiving  
a failing grade

**WASHINGTON, D.C. —** The Population Institute released its ninth annual *50 State Report Card on Reproductive Health and Rights* today. It shows that there is still a large division between states that are prioritizing reproductive health and rights and those that are seeking to curtail access and rights. The U.S. again received a failing grade. While the election of Joe Biden and Kamala Harris portends good news for reproductive health and rights at the federal level, the reshaping of the federal judiciary by the Trump/Pence administration could prove disastrous for decades to come for reproductive health, rights and justice.

Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## WISCONSIN’S GRADE

**Wisconsin** received an “F” this year. Most notably, Wisconsin received poor marks for:

**Wisconsin** mandates HIV education, but it does not require that condoms be part of the curriculum.

**Wisconsin** has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; there is a mandatory waiting period of 24 hours between counseling and procedure and a patient must receive counseling on fetal pain; the patient is required get an ultrasound where the provider is must show and describe the image; parental consent is required; and

clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

**Wisconsin** received a “minus” because of a law that prevents abortion providers from receiving family planning funding.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

For the second year in a row, the U.S., as a whole, received an ‘F’. Several factors account for the failing grade, most notably:

### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them

to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers, including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

This year, after the death of Justice Ruth Bader Ginsburg, President Trump was able to appoint his third justice to the U.S. Supreme Court. With Amy Coney Barrett joining fellow Trump appointees Brett Kavanaugh and Neil Gorsuch on the bench it created a solid 6-3 conservative majority. Trump has also succeeded in stacking the lower federal courts. The U.S. Senate has confirmed over 200 Trump-nominated judges to the lower courts. In addition to restricting abortion rights, a more conservative federal judiciary could render rulings adversely affecting Title X, the coverage of contraception under the Affordable Care Act, and LGBTQ+ protections.





# WISCONSIN

## LOOKING AHEAD

In releasing this year's report card, Wetter warned that, "While the Biden/Harris administration will be able to change a number of policies put into place by the previous administration, not everything will be easily or quickly fixed. Taking advantage of the changes in the U.S. Supreme Court and the lower federal courts, opponents of reproductive health and rights will unleash a flurry of legal challenges to any legislative and regulatory changes. If successful, those challenges could set back progress on reproductive health, rights, and justice issues for decades to come. Unfortunately, the people most impacted will be underserved populations, including low income people, the Black community, other communities of color, young people, and the LGBTQ+ community."

## BREAKDOWN OF SCORES

# F- 29.5 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 8.5 / 10

Wisconsin has a teen pregnancy rate of 23 pregnancies per 1,000 women aged 15-19. We set 14 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Wisconsin has achieved 85% of the objective.

#### Unintended Pregnancy Rate 10 / 10

30% of Wisconsin's total pregnancies are unintended, compared to the objective of 30%. Thus, Wisconsin has achieved the target rate.

### PREVENTION

#### Sex Education 0 / 15

Wisconsin mandates HIV education, but it does not require that condoms be part of the curriculum.

#### Nurses Authorized to Dispense Medications 0 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are not authorized to dispense medications including birth control and STI treatment.

#### Emergency Contraception in Emergency Room 5 / 5

Wisconsin requires emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 0 / 5

Wisconsin does not explicitly allow all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

Wisconsin has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 5 / 5

Wisconsin offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of an amendment, is offered to people with income levels up to 306% of the federal poverty line. The family planning expansion is also extended to include men as well as individuals under the age of 19.

#### Insurance Coverage of Abortion 0 / 5

Wisconsin restricts abortion coverage in private insurance plans by only allowing abortion coverage for cases of life, rape, incest or severe physical health in health insurance plans sold on the insurance exchanges.

### ACCESS

#### Abortion Restrictions 0 / 10

Wisconsin has the following laws, which make it unnecessarily difficult for someone to have an abortion: abortion is prohibited after 20 weeks; there is a mandatory waiting period of 24 hours between counseling and procedure and a patient must receive counseling on fetal pain; the patient is required to get an ultrasound where the provider is must show and describe the image; parental consent is required; and clinicians who perform medication abortion procedures are required to be licensed physicians in the presence of the patient which by extension bans telemedicine.

#### TRAP Laws 0 / 5

Wisconsin has enacted a series of TRAP laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 0 / 5

Wisconsin has policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 1 / 5

70% of women in Wisconsin live in a county without an abortion provider.

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# WYOMING

is one of 23 states receiving  
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Jennie Wetter, the Institute’s director of public policy, said, “This year showed that nothing will stop “anti-choice” advocates from seeking to restrict access to reproductive health care. They sought in several states to use the pandemic as a pretext for denying access to abortion services by classifying it as nonessential health care. The Trump administration also sought to require, in the midst of a pandemic, that people seeking a medication abortion first see a doctor in person putting their health needlessly at risk. While courts blocked some of these and other attacks, opponents will keep trying. If they ultimately succeed, access to abortion, contraception, and other reproductive health services could be further curtailed.”

## METHODOLOGY

Using thirteen criteria, the Institute’s report card ranked each of the 50 states and the District of Columbia on four broad indicators relating to reproductive health and rights: effectiveness, prevention, affordability, and access. Based upon their composite scores (0-100), each state received a “core” grade (A, B, C, D or F), but some states received an additional “plus” or a “minus” for factors not reflected in the core grade.

## WYOMING’S GRADE

**Wyoming** received an “F” this year. Most notably, Wyoming received poor marks for:

**Wyoming** does not mandate sex education in public schools.

**Wyoming** has decided not to expand their Medicaid program under the Affordable Care Act.

96% of women in **Wyoming** live in a county without an abortion provider.

## STATE GRADES

Five states (California, Hawaii, New Jersey, Oregon, and Washington) received an “A” in this year’s report. Twenty-three states received a failing grade: Alabama, Arizona, Arkansas, Florida, Georgia, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

## THE NATIONAL GRADE

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### Title X

The Trump/Pence administration’s imposition of a “domestic gag rule,” which bars Title X clinics from counseling patients about abortion or referring them to abortion services, has had a devastating impact on a program providing family planning services to 4 million households a year. Several states and providers,

including Planned Parenthood, have opted out rather than abide by the new restrictions. As traditional and trusted family providers drop out, the Trump administration has been awarding Title X grants to “crisis pregnancy centers” run by staunch anti-abortion advocates, some of whom do not even provide contraceptive services to clients.

### Federal Courts

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# WYOMING

## LOOKING AHEAD

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## BREAKDOWN OF SCORES

# F 49.2 / 100

### EFFECTIVENESS

#### Teen Pregnancy Rate 7.3 / 10

Wyoming has a teen pregnancy rate of 37 pregnancies per 1,000 women aged 15-19. We set 21 pregnancies per 1,000 teen women by 2025 as the goal, which indicates that Wyoming has achieved 73.3% of the objective.

#### Unintended Pregnancy Rate 8.9 / 10

35% of Wyoming's total pregnancies are unintended, compared to the objective of 30%. Thus, Wyoming has achieved 88.6% of the target rate.

### PREVENTION

#### Sex Education 0 / 15

Wyoming does not mandate sex education in public schools.

#### Nurses Authorized to Dispense Medications 5 / 5

Clinical Nurse Specialists, Nurse Practitioners, and Nurse Midwives are authorized to dispense medications including birth control and STI treatment which increases access to health care.

#### Emergency Contraception in Emergency Room 0 / 5

Wyoming does not require emergency rooms to provide information about emergency contraception and dispense it on request to sexual assault victims.

#### Minors' Access to Contraception 5 / 5

Wyoming explicitly allows all minors to consent to contraceptive services.

### AFFORDABILITY

#### Medicaid Expansion 0 / 15

Wyoming has decided not to expand their Medicaid program under the Affordable Care Act.

#### Medicaid Family Planning Expansions 0 / 5

Wyoming offers Medicaid expansions to cover family planning services for people who otherwise do not qualify for Medicaid. The expansion, in the form of a waiver for loss of coverage post-partum, but does not expand coverage based on income.

#### Insurance Coverage of Abortion 5 / 5

Wyoming does not restrict coverage of abortion in private insurance plans.

### ACCESS

#### Abortion Restrictions 8 / 10

Wyoming has the following laws, which make it unnecessarily difficult for someone to have an abortion: parental consent and notice is required and clinicians who perform medication abortion procedures are required to be licensed physicians.

#### TRAP Laws 5 / 5

Wyoming has not enacted TRAP Laws which are targeted regulation of abortion providers beyond what is necessary to ensure patient safety.

#### Abortion Policy With Loss of Roe 5 / 5

Wyoming does not have policies in place that could ban abortion if Roe is struck down.

#### Abortion Access 0 / 5

96% of women in Wyoming live in a county without an abortion provider.

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