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Oregon Legislators Attend White House Meeting with States Expanding Abortion Access in Preparation for Post-*Roe* U.S.

Legislators discussed state efforts to expand abortion access as Republican-led states pass restrictive bans and the Supreme Court prepares to overturn Roe v. Wade

SALEM, Ore. - Today, as the United States Supreme Court moves closer to overturning 50 years of precedent set by *Roe v. Wade* and states across the country look to fully ban abortion, Oregon <u>House Majority Leader Julie Fahey</u> (D-West Eugene/Junction City) and <u>Representative Andrea Valderrama</u> (D-Outer East Portland) met with White House officials and state legislators from California, Washington, Illinois, Maryland, New York and Connecticut to discuss preparations and legislation to protect and expand abortion access.

"In Oregon, years of strong Democratic majorities in both chambers and Democratic governors have given us a head start on passing some of the strongest abortion access laws in the country–laws that have already served as a model for other states," Majority Leader Fahey said. "As we prepare to be a bulwark for abortion access when *Roe* falls, communicating and coordinating with other states working to expand reproductive health care is critical."

In 2017 Oregon Democrats passed the Reproductive Health Equity Act (RHEA), breaking down barriers to abortion access and making the full range of reproductive health care more affordable and accessible for all Oregonians. The law, which was chief sponsored by Majority Leader Fahey, who at the time was a first-term legislator, codified the right to an abortion in state law, and required health insurance plans to cover a full range of services at no out-of-pocket cost to the patient, including STI screenings, certain cancer screenings, IUD insertion, vasectomies, and abortion care. It also prohibited discrimination in coverage or delivery of care based on gender, sexual orientation, race, disability or immigration status.

To close existing gaps in reproductive health care access and in preparation for an influx of people seeking abortion care, Oregon Democrats in March <u>established the Reproductive</u> <u>Health Equity Fund</u>, a \$15 million investment to expand provider network capacity and

address urgent patient needs for abortion funds and practical support – like travel and lodging.

"Despite the progress we've made, we know the impact of overturning *Roe* will be felt largely by Black, Latinx, Indigenous, people of color and LGBTQ+ communities, low-income individuals and families, people with disabilities, rural areas, among other communities who face structural racism and discrimination," Rep. Valderrama said. "This \$15 million is critical and will address longstanding health disparities and ensure resources are available to those who may be impacted by the loss of federal abortion protections."

Oregon Democrats also recently <u>announced the formation of the Reproductive Health and</u> <u>Access to Care Work Group</u> of providers, clinics, community organizations, and legislators that will focus on making recommendations for the 2023 legislative session and beyond. Recommendations may include policy, administrative, and budget proposals to protect, strengthen, and expand equitable access to all forms of reproductive care, gender-affirming care, and quality of care.

Eastern Oregonians who rely on Boise and Meridian as the closest health centers could see an up to <u>35% decrease</u> in access to care when Idaho bans abortion. According to the Guttmacher Institute, Oregon could experience a potential <u>234% increase</u> in people traveling to the state, depending upon the bans that go into effect, creating added barriers for people seeking abortion care locally.

In addition to legislators across the country, several officials from the Biden-Harris administration were in attendance today, including Jennifer Klein, DAP and Director of the White House Gender Policy Council; Julie Rodriguez, DAP and Director of the White House Office of Intergovernmental Affairs; and Morgan Mohr of the Office of Intergovernmental Affairs.

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