AN ACT to amend the public health law, in relation to enacting the reproductive freedom and equity program

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1. Section 1. Short title. This act shall be known and may be cited as the "reproductive freedom and equity program".

2. Legislative findings. The legislature finds:

   1. Abortion is essential health care and integral to the overall health and wellbeing of individuals.

   2. In 1970, New York legalized abortion, three years prior to the Supreme Court decision in Roe v. Wade, which enumerated a constitutional right to abortion care.

   3. On January 22, 2019, the 36th anniversary of the Supreme Court Decision Roe v. Wade, New York modernized our state law to be consistent with the holdings of Roe v. Wade, articulating in that every individual has a fundamental right to abortion.

   4. Despite a constitutional and state right to abortion care, barriers exist that challenge an individual's ability to exercise their right to care.

   5. Individuals seeking abortion care can often experience obstacles to obtaining an abortion, whether that is an inability to afford the cost of care, the distance one must travel, the costs associated with travel including transportation needs, childcare, lodging, lost wages and more.

   6. Barriers to care are often intensified for immigrants, young people, people with disabilities and those living in rural areas.

EXPLANATION—Matter in italics (underscored) is new; matter in brackets [−] is old law to be omitted.

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7. If the United States Supreme Court overturns Roe v. Wade, access to care across the country will dramatically shift with people in at least 26 states - 36,000,000 women and individuals with the capacity to become pregnant - losing access to care.

8. It is estimated that in the wake of state bans on abortion across the country, New York would be the nearest provider of care for 190,000 to 280,000 more women of reproductive age.

9. Abortion funds, abortion providers, and other community-based organizations have provided essential support to individuals facing practical support needs. These entities assist individuals seeking abortion care including those living in New York, those traveling to New York and those who must travel outside of New York for care.

10. With no direct state investment, safety-net abortion providers and abortion funds predominately rely on philanthropic giving to address unmet needs of abortion patients, challenging their ability to meet present need, or any future increase demand for care.

11. New York has a proud legacy of protecting and expanding access to comprehensive reproductive and sexual health care services, including abortion.

12. In furtherance of that legacy, it is incumbent upon the state to adopt bold and innovative programs and policies that protect and advance reproductive freedom.

§ 3. Article 25-A of the public health law is amended by adding a new section 2599-bb-1 to read as follows:

§ 2599-bb-1. Reproductive freedom and equity program. 1. As used in this section, the following terms shall have the following meanings:

(a) "Abortion" shall mean the termination of pregnancy pursuant to section twenty-five hundred ninety-nine-bb of this article.

(b) "Medical services" shall mean the range of care related to the provision of abortion.

(c) "Practical support" shall mean direct assistance to enable a person to obtain abortion care, including but not limited to ground and air transportation, gas money, lodging, meals, childcare, translation services, and doula support.

(d) "Program" shall mean the reproductive freedom and equity program.

2. There is hereby established in the department a reproductive freedom and equity program to ensure access to abortion care in the state. Such program shall provide funding to abortion providers and non-profit organizations whose primary function is to facilitate access to abortion care. The program is designed to provide support to abortion providers to increase access to care, fund uncompensated care, and to address the support needs of individuals accessing abortion care.

3. The commissioner is authorized to distribute funds made available for expenditure pursuant to this section. In determining funding for applicants under the program, the commissioner shall consider the following criteria and goals:

(a) Increase access to care by growing the capacity of abortion providers to meet present and future care needs. Funds shall be awarded to support the recruitment and retention of staff, patient navigators, staff training, the establishment of new or renovation of existing health centers, investments in technology to facilitate care, security enhancements, and other operational needs that reflect the intention of increasing access to abortion care.

(b) Fund uncompensated care, to ensure the affordability of and access to care for anyone who seeks care in the state, regardless of their ability to pay for care. Funds shall be awarded to abortion providers
and non-profit entities to support uncompensated costs of the medical
services associated with abortion care for individuals who lack insur-
ance coverage, are underinsured, or whose insurance is deemed unusable
by the rendering provider.

(c) Address practical support needs of individuals accessing abortion
care. Funds shall be awarded to non-profit entities providing practical
support to individuals within and traveling to the state.

4. In establishing and operating the program, the department shall
consult a range of experts including but not limited to individuals and
entities providing abortion care, abortion funds and other organizations
whose mission is to expand access to abortion care, to ensure the
program structure and expenditures are reflective of the needs of
abortion providers, abortion funds and consumers. The department shall
promulgate regulations necessary for implementation of the program.

5. The department shall not request, promulgate regulations to, or
otherwise require, any abortion provider or non-profit organization
receiving monies from the program to divulge the name, address, photo-
graph, license number, email address, phone number, or any other
personally identifying information of any patient, or individual who
sought or received practical support from such provider or organization,
in conjunction with the funding provided pursuant to this section.

6. Any non-profit organization or provider receiving funds from the
program shall take all necessary steps to ensure the confidentiality of
the individuals receiving services pursuant to state and federal laws.

§ 4. Funding used to support the program shall be pursuant to funds
appropriated by the legislature and pursuant to subsequent chapters of
law. Such funding shall also be used to support the cost of adminis-
tering the program and for any other purpose authorized by this act. The
level of expenditure by the department for the administrative support of
the program created pursuant to this act shall be subject to review and
approval annually through the state budget process.

§ 5. Severability clause. If any provision of this act, or any appli-
cation of any provision of this act, is held to be invalid, or to
violate or be inconsistent with any federal law or regulation, that
shall not affect the validity or effectiveness of any other provision of
this act, or of any other application of any provision of this act,
which can be given effect without that provision or application; and to
that end, the provisions and applications of this act are severable.

§ 6. This act shall take effect on the sixtieth day after it shall
have become a law. Effective immediately, the addition, amendment and/or
repeal of any rule or regulation necessary for the implementation of
this act on its effective date are authorized to be made and completed
on or before such effective date.