

MEDICATION ABORTION

WHAT IS MEDICATION ABORTION?

Medication abortion can be used as an alternative to surgical abortion to end a pregnancy in the first trimester. Two drugs are used to accomplish this: Mifepristone (also known by its trade name “Mifeprex”) works by blocking the hormone progesterone, which is necessary for maintaining the uterine lining during pregnancy. Misoprostol, a drug that induces uterine contractions, is taken two days later. This regimen has a 92-95% success rate in ending pregnancy, and complications are extremely rare. Between 2001 and 2014, medication abortions increased nationally as a proportion of all abortion methods, from only 6% to 31%, reflecting a trend towards earlier abortions.

STATE RESTRICTIONS

Since 2004, states have enacted several types of restrictions on medication abortion, most of which target providers and patient access. States in the Southeast have a high number of restrictions, making women in this region particularly vulnerable to obstacles.

TYPE OF RESTRICTION	IMPLICATIONS	SOUTHEASTERN STATES
<p>Physician-Only Requirements Despite evidence that mid-level providers (PAs/NPs) can administer these drugs, many states require prescription by a licensed physician.</p>	<p>Restricts provider accessibility. Increases cost (travel, reimbursement of high-level provider).</p>	<p>AL, AR, LA, MS, TN, KY, VA, NC, SC, GA, FL</p>
<p>Physician In-the-Room Requirements Mandate that a licensed physician be physically present in the room during administration of medication, despite evidence this is done safely at home.</p>	<p>Requires min. of three in-person visits. Eliminates potential use of telemedicine.</p>	<p>AL, AR, LA, MS, TN, KY, VA, NC, SC</p>
<p>Unnecessary Procedures Date of last menstrual period (LMP) is sufficient for determining gestational age, yet states require ultrasounds be performed to determine medication abortion eligibility.</p>	<p>Increases patient and facility cost and time. Requires unnecessary medical procedure. Requires min. of three in-person visits.</p>	<p>Provider must display and describe image: LA, KY*, NC* Must offer woman option to view image: AL, FL, MS, VA</p>
<p>Number of Visits The number of visits required is often higher than recommended. Several studies and organizations have concluded that the entire process could be achieved safely at home.</p>	<p>Increases cost (patient and facility providing care). Reduces privacy (could be done at home).</p>	<p>In-person counseling required: AR, FL*, KY, LA, MS, TN, VA</p>

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<p>Counseling About Reversing Medication Abortion During initial counseling, providers must explain that the effects of mifepristone can be reversed if given a high dose of progesterone immediately after, despite no clinical evidence this works.</p>	Provides patients with inaccurate medical information.	AR, NC**
<p>Health Insurance The average cost of a medication abortion is \$535. State Medicaid often follows federal abortion coverage guidelines, and some states regulate private and marketplace plan coverage as well. Due to the Hyde Amendment, federal funds may only cover abortion in cases of rape, incest, or to save the life of the woman.</p>	Increases cost (for patient).	Medicaid & ACA Marketplace plan limits: AL, AR, FL, GA, KY, LA, MS, NC, SC, VA Private plan limits: KY

*court injunction; not enforced **bill proposed as of Dec 2018