

Ballot Initiative: Reproductive Freedom & Privacy Act

Summary of Fiscal Impact Statement

The State estimates the initiative would increase state expenditures between \$3,100 and \$7,800 annually, less than 0.001% of the state share of Idaho's Medicaid budget. This impact is derived from the costs of treating chemical abortion complications for women enrolled in Idaho's Medicaid program. Medicaid covers medically necessary services to treat complications from all abortions. It is anticipated that as legal abortions increase, the complications will also increase. This will likely result in an increase in Medicaid covered services and expenditures to treat complications from chemical abortions, which the State has reliable and readily accessible data to support.

Detailed Statement of Fiscal Impact Including Assumptions

Based on the amount of reliable data gathered by the Division Financial Management (DFM) and the outcome of the initiative (if passed), DFM limited its assumptions about any increase in costs to the state to those costs arising from the treatment of Medicaid recipients for chemical abortion complications. DFM does not have reliable and readily accessible data to reasonably calculate the fiscal impact attributable to the complications for surgical abortions.

Based on data provided by Department of Health and Welfare (DHW), DFM considered the number of childbearing women on Medicaid in 2021 which was 97,055. This represents about 25% of the total Idaho population for women in that same age group. DFM assumed that, as a result of this initiative, the number of chemical abortions conducted annually would increase to the levels prior to 2022, the year of the U.S. Supreme Court's decision returning the regulation of abortion to the States. Based on the number of chemical abortions performed in Idaho using the 2021 data from the vital records report (approximately 1,180), DFM assumed 25% (approximately 300) of those individuals were Medicaid recipients.

Taking the number of Medicaid recipients who would receive a chemical abortion, DFM assumed that 2% - 5% of those chemical abortions would result in complications. DFM assumed this based on information provided in (1) the United State's Food and Drug Administration's warning label for the Mifeprex and (2) studies related to abortion complications that were published on the National Library of Medicine website, which DHW provided to DFM.

Based on the claims for complications from chemical abortions provided by DHW for 2019 and 2022 claims data, DFM applied an average per person claim cost and added a 4% medical inflation year over year to account for current medical costs in FY2026. Based on that calculation, DFM assumes that about 300 individuals on Medicaid in Idaho could receive a chemical abortion and of those, 6 to 15 individuals could have complications from that chemical abortion with an average claim cost of about \$531 (state portion of the cost). Based on the process utilized, evidence readily available and gathered, and assumptions used to create the fiscal impact statement, total expenditures for the state would range from \$3,100 to \$7,800 per year.

While the specific fiscal impact to the state's expenditures is difficult to quantify, DFM cannot in good faith conclude that the proposed initiative will have no fiscal impact on state expenditures.