The Detroit News’ editorial Dec. 6, “Lawmakers should reject anti-abortion bill,” presented arguments against initiated legislation that would prohibit taxpayer subsidized abortions on the state health care exchange. The editorial, unfortunately, neglected to mention two salient points: First, abortion is not health care; second, taxpayers should not be forced to pay for another person’s abortion.

When federal health care reform passed in 2010, it included language that spoke to this very issue. According to the law, states preferring not to include abortion coverage in the forthcoming health care exchange could opt out. To date, 24 states have excluded abortion coverage in their health policies scheduled to become active in January. Why? Because health plans sold on the exchange will be heavily subsidized. These subsidies will apply to a participant’s premium and automatically reduce the plan’s monthly cost. Taxpayer dollars will fund these subsidies. In order to prevent every taxpayer in this state from paying for abortion coverage in subsidized plans, legislation to opt out was necessary.

It does not make for good public policy to mandate taxpayers pay to terminate the life of another person’s unborn child. A provision of the voter-approved Michigan Constitution has allowed well over a quarter million citizens to prompt their elected officials to do something about it. We live in a representative democracy, and elected officials are sent to Lansing to represent their constituents. A legislative vote to prevent taxpayer subsidized abortion was therefore necessary.

Opposition to the initiated legislation has primarily focused on how a severely violated woman would be impacted. Most hospitals and appropriate medical facilities are prepared to immediately address this dreadful matter of unwanted aggression. The Religious and Ethical Directives for Catholic Health Care Services, for example, help bring clarity. The ethical directives state that “a female who has been raped should be able to defend herself against a potential conception from the sexual assault.” After necessary testing, the directives allow for proper medications to be administered. Nothing in the legislation inhibits this course of medical care, and it should be noted that neither does it restrict access to abortion.

Reducing abortion should be a common goal for those on both sides of the issue. When Michigan residents voted in 1988 to disallow Medicaid-funded abortions, the number of terminated unborn lives plummeted. While the state has estimated that roughly 3 percent of abortions are paid with insurance, that number would only balloon if taxpayers were put on the hook to subsidize health plans that include abortion coverage.

The Legislature has thankfully acted to prevent this. Abortion is not health care.

Rebecca Mastee, policy advocate

- **Orr, Duggan meet to decide the mayor-elect's role**

  Nolan Finley: Mike Duggan will meet again with Kevyn Orr today to define what responsibilities he will have when he assumes the Detroit mayor’s office on Jan. 1.

- **Was budget deal good for America?**
• Why do liberals fear the market economy?