

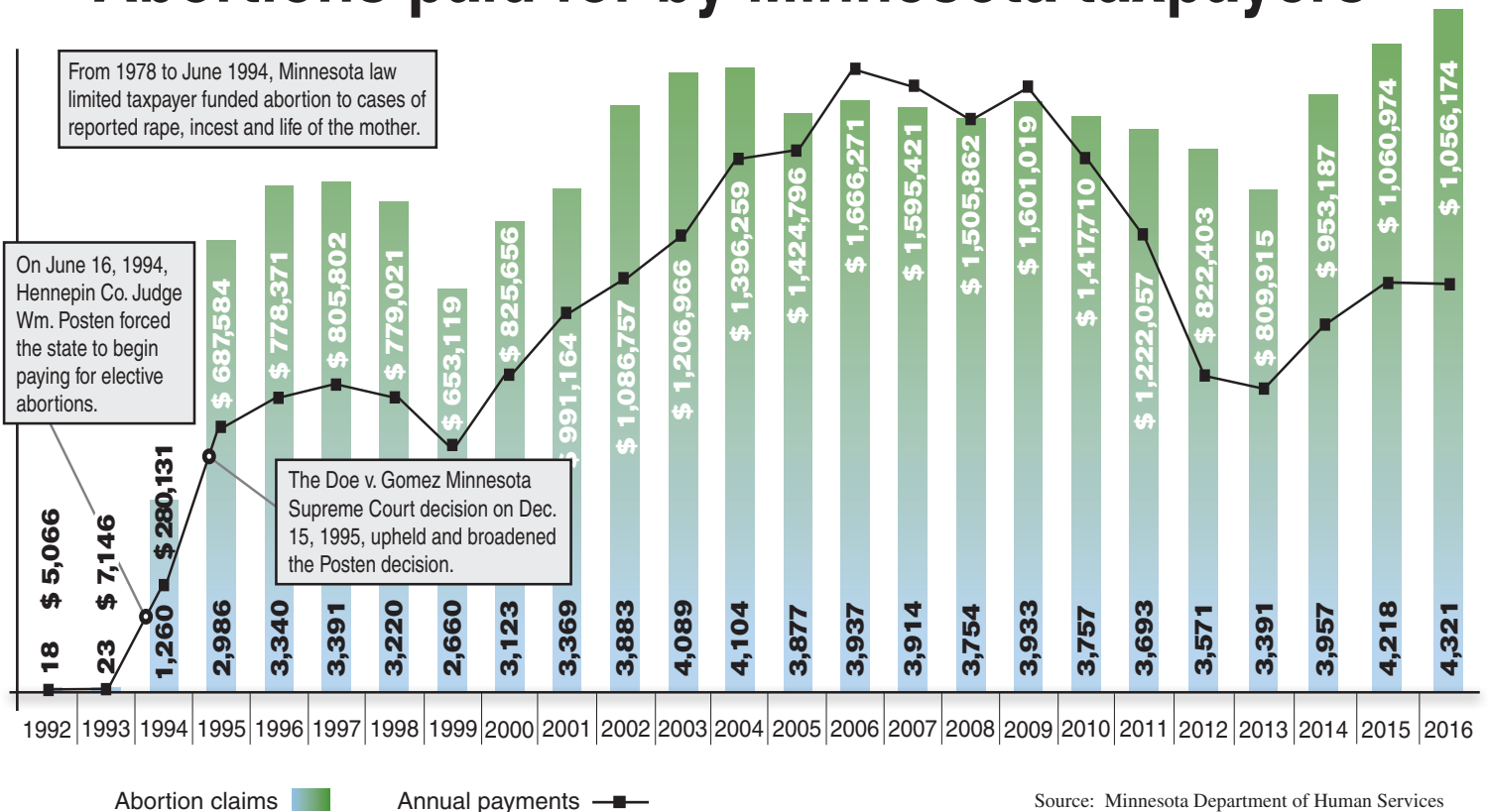
Minnesota's Extreme Abortion Policy:

If you think **ROE v. WADE** is bad—check out **Minnesota's DOE v. GOMEZ!**

In 1973 the U.S. Supreme Court established a federal “right” to abortion in its Roe v. Wade decision. In 1995, the Minnesota Supreme Court created a state “right” to abortion and required taxpayers to fund elective abortions for low-income women in its Doe v. Gomez ruling. Even if Roe v. Wade is overturned at the national level, Doe v. Gomez declares that the Minnesota Constitution—as currently interpreted—would still require allowing abortion for any reason throughout pregnancy, and require taxpayer funded abortions.

	Roe v. Wade	Doe v. Gomez
Creates constitutional “right” to abortion	✓	✓
Allows abortion for any “health” reason, such as discomfort, stress or iron deficiency	✓	✓
Allows abortion through all nine months of pregnancy	✓	✓
Obligates taxpayer funded abortions	No	✓
Forbids “interference” with a woman’s “decision-making” process	No	✓

Abortions paid for by Minnesota taxpayers



Note: During 1994–1998, 55 percent of tax-funded abortions were covered by managed-care plans (HMOs). The number of HMO abortion claims has been reported, but the costs of these abortions are not available. The dollar amounts shown for these years include estimates of HMO costs based on the average abortion costs paid under fee-for-service plans (traditional insurance). Starting in 1999, all tax-funded abortion costs are paid and reported under fee-for-service plans.

Starting in 2005, the total dollar amounts also include payments for “Treatment of incomplete induced abortions.”

Reversing Doe v. Gomez:

Overturing a constitutional amendment is difficult. Hearts and minds need to change. The legal system in Minnesota affords us several options.

One remedy is for the Minnesota Supreme Court to overturn its own ruling. This could be accomplished by passing legislation that directly conflicts with the Doe v. Gomez decision, forcing the issue back into the court system. This would require citizens to elect Constitution-respecting justices and a pro-life governor to appoint them.

A second option requires both the Minnesota Legislature and Minnesota voters to pass an amendment to the state Constitution. This would bring the issue directly to the people of Minnesota for a vote.

What can you do?

- **Educate friends and neighbors.** Give them the facts about this extreme ruling.
- **Inform the public.** Write letters to the editor about Doe v. Gomez. Explain its impact on unborn children and Minnesota taxpayers. Sample letters are available from MCCL.
- **Help build a pro-life community** where you live, work and worship. Encourage others to join MCCL and receive MCCL News.

Taxpayer funding of abortion exceeds \$24.6 million

A court decision on June 16, 1994, forced the state to begin paying for abortions; the state Supreme Court upheld and broadened that decision in Doe v. Gomez in December 1995. **The following figures show taxpayer dollars paid to abortion providers from July 1994 through December 2016.**

Provider	# of Abortion Claims	Amount Paid
Mildred Hanson (Minneapolis)	7,136	\$2,741,386.94
Mayo Clinic (Rochester)	<45	\$22,587.01
Meadowbrook Women's Clinic (Minneapolis) 1994-2012	17,246	\$4,368,913.03
Midwest Health Center for Women (Minneapolis) 1994-2012	8,296	\$2,012,912.70
National Women's Health Org. (Fargo) 1995-2000	311	\$65,048.07
Planned Parenthood Minn/NoDak/SoDak	17,391	\$4,231,964.69
Red River Women's Clinic (Fargo)	2,349	\$469,087.64
Regions Hospital & Clinic (St Paul) 1994-2011	5,094	\$4,949,709.32
Robbinsdale Clinic (Robbinsdale)	7,827	\$1,925,182.77
Univ. of Minnesota clinics	<48	<\$28,853.00
Whole Woman's Health (Minneapolis)	<4,627	<1,078,722.00
Women's Health Center (Duluth)	3,474	\$731,661.43
Total for clinics with 10 or less claims (3 or less through 2014)	<37	<\$36,347.00
*HMO-covered abortions 1994-1998	7,854	\$1,849,581.66
Treatment of incomplete induced abortions		\$140,948.34
TOTAL	81,710	\$24,654,060.49

* During 1994–1998, 55 percent of tax-funded abortions were covered by managed-care plans (HMOs). Provider names and dollar amounts for the 7,854 managed-care covered abortions have not been made available. HMO costs have been estimated based on the average abortion costs paid under fee-for-service plans (traditional insurance).

Source: Minnesota Department of Human Services

