used to pay for abortion services; such states are hereafter referred to as Medicaid-coverage states, while their counterparts are non–Medicaid-coverage states.

In 2014, some 35% of abortion patients reported that they had Medicaid insurance coverage, and 31% had private insurance (Table 3). Starting in January 2013, women had the option of obtaining health insurance through HealthCare.gov or their state’s health insurance exchange, and 3% of abortion patients indicated that they had done so.* A similar proportion said they had some other type of insurance. None of the changes in type of insurance coverage between 2008 and 2014 were sizeable, but the decline in the proportion of abortion patients who were uninsured—from 34% to 28%—was statistically significant.

While fewer abortion patients were uninsured in 2014 than in 2008, there were no significant changes in how patients paid for their abortions. Regardless of insurance coverage, 53% of patients reported that they paid for the abortion themselves. Medicaid was the second-most-common method of payment, reported by 24% of patients; the overwhelming majority of these patients (96%) lived in the 15 states that allow state funds to be used to pay for abortions (not shown).† Fifteen percent of patients reported that they used their private insurance to pay for the procedure, and 14% relied on some type of financial assistance. Notably, most patients with private health insurance (61%) paid out of pocket for their abortion (not shown). Eight percent relied on more than one payment method, most commonly paying themselves and getting financial assistance. While there were shifts in type of payment between 2008 and 2014—in particular, a decrease in the proportion who were self-paying and an increase in reliance on Medicaid—the changes were not statistically significant.

Patterns of change in type of insurance and how patients paid for the procedure differed according to whether the patient lived in a Medicaid-coverage state. In both types of states, the proportion of patients who were uninsured declined significantly between 2008 and 2014. For patients in Medicaid-coverage states, this was due to a significant increase from 43% to 51% in the proportion with Medicaid coverage. In non–Medicaid-coverage states, 4% of abortion patients obtained coverage through

*The survey instrument did not include a follow-up question asking if this insurance was private or public, and we were unable to further categorize the responses. We also expect that some women who obtained health insurance through these sources reported it as private or Medicaid.
†We assume the 3% of patients using Medicaid in non–Medicaid-coverage states were terminating pregnancies that were the result of rape or incest or that endangered the life of the woman.