



Written by [Dave Bohon](#) on July 9, 2013

CBO Estimates Late-Term Abortions Save Medicaid Dollars

A Congressional Budget Office (CBO) “[cost estimate](#)” of a proposed bill that would ban abortions after 20 weeks of pregnancy found that preborn babies who have reached that gestational age are presently aborted at a rate of about 11,000 per year — for an overall savings to the federal Medicaid healthcare system. In its estimation of the federal cost to implement the House-passed [Pain Capable Unborn Child Protection Act](#) (H.R. 1797), the CBO explained that based on data from the federal Centers for Disease Control, every year “about 11,000 abortions take place 20 weeks or more after fertilization.”



[CSNews.com](#) crunched the CBO numbers and found that in “a 365-day year, 11,000 late-term abortions works out to a little more than 30 per day — counting weekends and holidays.... If it were assumed that those performing late-term abortions only worked 40 hours a week — or 2,080 hours in a 52-week year (without vacations) — that would mean that an average of about 5.3 unborn babies who have made it to at least the 20th week of pregnancy are aborted each work hour in the United States,” or, added the conservative news site, “an average of about 212 per week.”

While the CBO report estimates that “only a relatively small number of abortions would be prohibited” with the passage of the H.R. 1797, CSNews noted that in reality, at 11,000 late-term abortions each year, “American abortionists terminate enough late-term babies in just twelve months to populate Congress [with 435 members] more than 20 times over.”

As for cost, the CBO predicted that most of the women who would have had the late-term abortions banned under H.R. 1797, would opt for earlier procedures, which would cost the federal Medicaid program additional money. “For example,” the report estimated, “if 90 percent of women who would have sought an abortion 20 weeks or more after fertilization instead were to seek earlier abortions, federal spending would rise about \$75 million over 10 years.” Since 40 percent of all births in the U.S. are paid for under Medicaid, the report noted, “If only half of those women were to obtain earlier abortions, then federal spending could rise by more than \$400 million over 10 years,” since they would presumably carry the babies to term. “CBO estimates that federal spending for Medicaid will rise to the extent that enacting H.R. 1797 results in additional births and deliveries relative to current law.”

In its estimation the CBO made the assumption that “around three-quarters of abortions that would occur 20 weeks or more after fertilization under current law would take place earlier, before the 20th week restriction is triggered, under the act. As a result, we estimate that the increase in federal costs for Medicaid would total \$225 million over the 2014-2023 period.”

The bottom line is, the report concluded, preventing the late-term abortions of those estimated 11,000 babies “would result in increased spending for Medicaid. Since a portion of Medicaid is paid for by state governments, CBO estimates that state spending on the program would increase by about \$170 million



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over the 2014-2023 period.”

What the CBO “cost estimate” didn’t factor in, however, noted CNSNews, is “how much wealth and job-creating power U.S. society has lost and will lose in the future because 11,000 late-term unborn babies per year are killed by abortionists and not allowed to live out their lives.”

Sadly, with a pro-abortion Democrat majority presently controlling the U.S. Senate, and with a late-term-abortion champion in the White House with a veto pen at the ready, there is virtually no chance for passage of the Pain Capable Unborn Child Protection Act in the foreseeable future.



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