Key points:
• Telehealth abortion care is as safe and effective as in-clinic care.
• Telehealth offers important benefits compared to in-clinic care for some patients.
• Telehealth abortion is increasing abortion access, especially for patients who face the most barriers to care.
• An upcoming Supreme Court case may eliminate access to telehealth abortion.
• Bans on telehealth abortion are not based in science.

Overview and Background
Access to abortion care in the United States is increasingly limited and highly unequal.¹

• In 2022, the Supreme Court’s Dobbs v. Jackson decision ended constitutional protections for abortion.
• Since Dobbs, 14 states have banned abortion, increasing barriers to abortion care.²
• Abortion clinics are closing in record numbers and patients are traveling longer distances to clinics that currently remain open.³
• In states where abortion is still legal, clinics are facing increased demand, which is increasing wait times for appointments.
• The 2024 Alliance for Hippocratic Medicine v. FDA Supreme Court case could ban telehealth abortion across the country.

What is telehealth abortion?
• Telehealth abortion allows patients to be screened for medical eligibility remotely by a clinician, receive abortion medications by mail, and complete their abortion process under the remote care of their clinician.
• Telehealth abortion has grown since its introduction in 2020 and now accounts for 16% of U.S. abortions.⁴
• However, in addition to states that ban abortion, 12 states* allow abortion but prohibit telehealth.
• This means that telehealth abortion is only legally available for patients living in 24 states and D.C.

* AZ, FL, GA, IA, NC, NE, OH, SC, UT, WI

The California Home Abortion by Telehealth (CHAT) Study
• Researchers at the University of California, San Francisco’s ANSIRH program conducted the CHAT Study, the largest study of telehealth abortion in the U.S.
• The CHAT Study includes data from over 6,000 patients who received telehealth abortion care from 3 virtual abortion clinics.
• Data were collected in 2021 and 2022, before the Dobbs decision.
• Patients were mailed medications in 20 states and Washington, D.C.
**Findings**

The largest study of telehealth abortion in the U.S. has demonstrated that it is safe and effective, preferable for many patients, and increases access to abortion care.

**Telehealth is as safe and effective as abortion care in a clinic**

- Telehealth is extremely safe: More than 99% of patients who had telehealth abortions did not experience a complication like hospitalization or surgery.
- Telehealth is highly effective: over 97% had a complete abortion without an intervention, like more medication or a procedure, to complete their abortion. The overwhelming majority had an uneventful abortion and were able to complete the process without stepping foot in a doctor's office.

**Telehealth can increase abortion access**

- Patients avoid a large amount of travel to abortion clinics by using telehealth for abortion.
- 43% of patients would not have been able to obtain a timely abortion without telehealth.
- This was especially true for younger people, those living on lower incomes, those living in rural areas, and those who lived far from an abortion clinic.

**Telehealth is very satisfactory**

- Nearly all patients trusted the telehealth provider, felt telehealth was the right decision, felt cared for, and were very satisfied.
- The most commonly reported benefits of telehealth abortion were privacy, lower cost, and fast access to care.

**Policies that prohibit telehealth abortion:**

- Are not based in science
- Reduce quality of care
- Widen existing gaps in abortion access

**States that restrict telehealth for abortion should change policies to allow this type of care, so that more people, especially those who face the most barriers, can access this care.**

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**References**

5. #WeCount February 2024 Report. Society of Family Planning, February 28, 2024.