

119<sup>TH</sup> CONGRESS  
2<sup>D</sup> SESSION

# S. 4922

To authorize grants to eligible entities to pay for travel-related expenses and practical support for individuals with respect to accessing abortion services, and for other purposes.

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## IN THE SENATE OF THE UNITED STATES

JUNE 24, 2026

Ms. BALDWIN (for herself, Mrs. MURRAY, Mr. PADILLA, Ms. HIRONO, Mr. BLUMENTHAL, Mr. MERKLEY, and Mr. SANDERS) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

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## A BILL

To authorize grants to eligible entities to pay for travel-related expenses and practical support for individuals with respect to accessing abortion services, and for other purposes.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Reproductive Health  
5       Travel Fund Act of 2026”.

6       **SEC. 2. FINDINGS.**

7       Congress finds as follows:

1           (1) On June 24, 2022, in its decision in *Dobbs*  
2           *v. Jackson Women’s Health Organization* (142 S.  
3           Ct. 2228 (2022)) (referred to in this section as the  
4           “*Dobbs decision*”), the Supreme Court overturned  
5           *Roe v. Wade* (410 U.S. 113 (1973)), reversing dec-  
6           ades of precedent and eliminating the constitutional  
7           right to abortion.

8           (2) Almost overnight, the *Dobbs decision* deci-  
9           mated the abortion access landscape for millions of  
10          people in the United States. Since the *Dobbs deci-*  
11          sion, 13 States have effectively banned abortion and  
12          many more have severe restrictions in place that  
13          make care inaccessible.

14          (3) Because of severe restrictions and bans on  
15          abortion, dozens of clinics have been forced to close  
16          or stop providing abortions. Thousands of people are  
17          forced to travel farther away from their homes, com-  
18          munities, and support networks, at great risk to  
19          their health and well-being. Others are not able to  
20          get an abortion at all and have been forced to stay  
21          pregnant against their will.

22          (4) The amount of time and distance abortion  
23          seekers must travel is increasing and becoming more  
24          difficult to overcome. Before the *Dobbs decision*, less  
25          than 1 percent of the United States population was

1 more than 200 miles from a health care provider,  
2 and the average person was only 25 miles from a  
3 provider. After the Dobbs decision, 14 percent of the  
4 United States population is more than 200 miles  
5 from the nearest abortion provider, and the average  
6 person is 86 miles from a provider.

7 (5) In 2025, 142,000 people traveled across  
8 State lines to obtain an abortion. This includes  
9 62,000 people living in States with total bans, more  
10 than double the number who traveled from these  
11 States prior to the Dobbs decision. Because of the  
12 concentration of bans in the Southeast and Midwest,  
13 many people are traveling across multiple State  
14 lines, requiring hundreds of miles of travel each way.

15 (6) The consequences of the Dobbs decision fall  
16 hardest on people who already face the most barriers  
17 to health care due to systemic barriers and discrimi-  
18 nation, including Black people, Indigenous people,  
19 people of color, people with disabilities, people in  
20 rural areas, young people, people who are immi-  
21 grants or undocumented, LGBTQ+ people, people  
22 who are parenting, people with complex medical  
23 needs who require hospital-based care, and people  
24 having difficulty making ends meet.

1           (7) Longer travel times, combined with other  
2 immense barriers, increase the cost of transpor-  
3 tation, food, lodging, and childcare, and increase the  
4 amount of lost wages. These barriers can also push  
5 abortion care later into pregnancy, increasing the  
6 cost of care. This heightened cost pushes abortion  
7 care out of reach for many people without financial  
8 and practical assistance.

9           (8) The harm of being denied a wanted abor-  
10 tion is well researched and established. Being denied  
11 a wanted abortion means those individuals are more  
12 likely to experience poverty, have worse health out-  
13 comes, and are more likely to remain in abusive rela-  
14 tionships.

15           (9) Even before the Dobbs decision, abortion  
16 was extremely difficult to access because of medi-  
17 cally unnecessary bans and restrictions, including ar-  
18 bitrary limits on when someone can get an abortion,  
19 how abortions can be provided, and bans on insur-  
20 ance coverage for abortions like the Hyde Amend-  
21 ment, among many others.

22           (10) Abortion funds and practical support orga-  
23 nizations (in this section referred to as “abortion  
24 funds”) exist for this reason. Abortion funds are  
25 community-based organizations that directly support

1 people seeking abortions. They provide a wide range  
2 of support, including funding for abortions and prac-  
3 tical support such as transportation, food, lodging,  
4 childcare, translation services, doula services, and  
5 more. Abortion funds collaborate at the local, re-  
6 gional, national, and international levels to support  
7 people seeking abortions. Many abortion funds are  
8 led by people who have had abortions themselves and  
9 understand the complex circumstances abortion  
10 seekers face, including a growing number of Black  
11 and Brown leaders.

12 (11) Since the Dobbs decision, as tens of thou-  
13 sands more abortion seekers are being forced to  
14 travel across State lines for their abortions each  
15 year, the cost of supporting abortion seekers has  
16 more than doubled. On average, abortion funds pro-  
17 vide nearly \$400 for each abortion seeker, with  
18 many abortion funds having to pool resources to get  
19 people the care they need.

20 (12) Abortion funds are navigating an increas-  
21 ingly hostile landscape that is causing the costs of  
22 care to rise. Since the Dobbs decision, abortion  
23 funds have doubled the number of abortion seekers  
24 they support. In 2025 alone, abortion funds provided

1 over \$63,000,000 in funding for abortions, over  
2 \$14,000,000 of that was for practical support.

3 (13) Despite the efforts of abortion funds, thou-  
4 sands of people are still unable to get the resources  
5 they need to have their abortions. According to the  
6 National Network of Abortion Funds, in 2025, near-  
7 ly one-third of the abortion funds in their network  
8 reported they have been forced to temporarily close,  
9 sometimes repeatedly, and were unable to meet the  
10 needs of large numbers of callers because of a lack  
11 of funding, legal shifts, staff capacity, burnout, and  
12 security concerns.

13 (14) Abortion funds have been severely  
14 underresourced and underinvested in, despite being  
15 uniquely positioned to support abortion seekers, as  
16 they have been doing for decades. Many rely on vol-  
17 unteer time and individual donations to support  
18 abortion seekers and their communities.

19 **SEC. 3. GRANTS TO PAY FOR TRAVEL EXPENSES AND PRAC-**  
20 **TICAL SUPPORT FOR INDIVIDUALS ACCESS-**  
21 **ING ABORTION SERVICES.**

22 (a) IN GENERAL.—The Secretary of the Treasury  
23 (referred to in this section as the “Secretary”) may award  
24 grants to eligible entities to pay for travel-related expenses

1 and practical support for individuals with respect to ac-  
2 cessing abortion services.

3 (b) TIMING.—Beginning not later than 30 days after  
4 the date of enactment of this Act, the Secretary shall so-  
5 licit applications for grants under this section.

6 (c) USE OF FUNDS.—

7 (1) PERMISSIBLE USES.—An eligible entity re-  
8 ceiving a grant under this section shall use the grant  
9 for travel-related expenses and practical support for  
10 individuals with respect to accessing abortion serv-  
11 ices, which may include any of the following ex-  
12 penses and support:

13 (A) Round trip travel to the location where  
14 the abortion services are provided.

15 (B) Lodging.

16 (C) Meals.

17 (D) Childcare.

18 (E) Translation services.

19 (F) Doula care.

20 (G) Patient education and information  
21 services.

22 (H) Lost wages.

23 (2) ORGANIZATIONAL COSTS.—An eligible enti-  
24 ty receiving a grant under this section may use up

1 to, but not more than, 15 percent of the grant funds  
2 to cover organizational costs such as—

3 (A) community outreach efforts;

4 (B) physical infrastructure construction  
5 and maintenance;

6 (C) website development and maintenance;

7 and

8 (D) increasing staff capacity and training.

9 (3) IMPERMISSIBLE USES.—An eligible entity  
10 receiving a grant under this section shall not use the  
11 grant for costs of an abortion procedure.

12 (d) APPLICATIONS.—To seek a grant under this sec-  
13 tion, an eligible entity shall submit to the Secretary an  
14 application at such time, in such manner, and containing  
15 such information as the Secretary determines appropriate.

16 (e) PRIORITY.—In selecting the recipients of grants  
17 under this section, the Secretary shall give priority to eligi-  
18 ble entities that—

19 (1) serve individuals who live in a jurisdiction  
20 that has banned or severely restricted access to  
21 abortion;

22 (2) serve individuals who travel to a jurisdiction  
23 other than the one where they live to receive abor-  
24 tion services; or

1           (3) have a program in operation, or submit as  
2 part of the application required under subsection (d)  
3 a plan to establish and operate a program, to help  
4 individuals access abortion services.

5 (f) ANNUAL REPORTS TO CONGRESS.—

6           (1) IN GENERAL.—Not later than 180 days  
7 after the date of enactment of this Act, and annually  
8 thereafter, the Secretary shall submit to Congress a  
9 report on the program under this section.

10          (2) CONFIDENTIALITY.—The reports under  
11 paragraph (1) shall not include any individually  
12 identifiable information.

13 (g) PREEMPTION.—

14          (1) IN GENERAL.—The provisions of this sec-  
15 tion shall supersede any provision of State, Tribal,  
16 territorial, or local law that would have the effect of  
17 prohibiting any use of funds provided for under this  
18 section.

19          (2) PROHIBITION ON FEDERAL COOPERATION  
20 IN ANTIABORTION PROCEEDINGS.—No Federal agen-  
21 cy or official engaged in carrying out the program  
22 under this section may cooperate with any State,  
23 Tribal, territorial, or local antiabortion proceeding,  
24 including any antiabortion investigation, prosecution,  
25 or civil lawsuit, relating to the activities carried out

1 under such program or any individual or entity re-  
2 ceiving or providing services under such program.

3 (h) DEFINITIONS.—In this section:

4 (1) The term “eligible entity”—

5 (A) means a nonprofit organization, or a  
6 community-based organization, that assists in-  
7 dividuals seeking an abortion through pro-  
8 grams, services, or activities that are unbiased  
9 and medically and factually accurate; and

10 (B) excludes any entity that discourages  
11 individuals from seeking an abortion.

12 (2) The term “nonprofit organization” means  
13 an organization that—

14 (A) is described in subsection (c)(3) of sec-  
15 tion 501 of the Internal Revenue Code of 1986;  
16 and

17 (B) is, under subsection (a) of such sec-  
18 tion, exempt from taxation.

19 (i) AUTHORIZATION OF APPROPRIATIONS.—To carry  
20 out this section, there is authorized to be appropriated  
21 \$350,000,000 for each of fiscal years 2027 through 2031.

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