



## Ensuring Access to Birth Control

### *An Act Relative to Advancing Contraceptive Coverage and Economic Security in our State*

Filed by Sen. Harriette Chandler and Reps. Pat Haddad and John Scibak (S 499, H 536)

**The Problem:** The Affordable Care Act, which ensures access to no-copay birth control, is under threat and barriers to affordable birth control persist, which could make birth control inaccessible for many in MA.

**The Solution:** Strengthen state law to ensure access to birth control without cost-sharing while improving access to the full range of contraceptive options and removing existing barriers to care.

#### The ACCESS bill will:

- **Guarantee coverage without cost-sharing for all unique FDA-approved contraceptives as well as contraception-related appointments and counseling.**
  - The ACA requires coverage with no cost-sharing for only one form of contraception within each of the 18 method categories. This is the bare minimum and does not provide adequate coverage, limiting a woman's ability to access the birth control that is right for her.
  - The ACCESS bill requires coverage for all unique forms of FDA-approved contraceptives, while allowing insurers to limit coverage of therapeutic equivalents.
- **Allow doctors to determine which birth control options are medically advisable,** ensuring health plans respect the decisions made between patients and their health care providers.
- **Limit the ability of insurers to impose restrictions and delays in coverage, while allowing reasonable medical management within a given contraceptive method category.**
  - Insurers **will** be able to control costs by charging co-payments for a brand name drug while covering a generic without costs (within a birth control method category).
  - Insurers **will not** be able to require women to try and "fail" (including pregnancy or medical complications) at multiple methods of birth control before authorizing coverage for another, possibly more effective form of birth control, such as an IUD.
- **Establish no-copay coverage for contraceptives available over-the-counter (OTC).**
  - Women are entitled to coverage of OTC emergency contraception without cost-sharing, but need to obtain a prescription in order for it to be covered – this is a medically unnecessary barrier that undermines the accessibility afforded with OTC status.
- **Require coverage for a single dispensing of birth control intended to last for 12-months.**
  - Limiting supplies of birth control increases the likelihood of inconsistent use, missing a dose or even skipping a month, increasing the chances of unintended pregnancy. It is especially challenging for those living in rural areas with limited access to pharmacies.

If you have any questions about this legislation, please contact PPAF, the 2017 Steering Committee Chair, via Leda Anderson at [landerson@pplm.org](mailto:landerson@pplm.org).