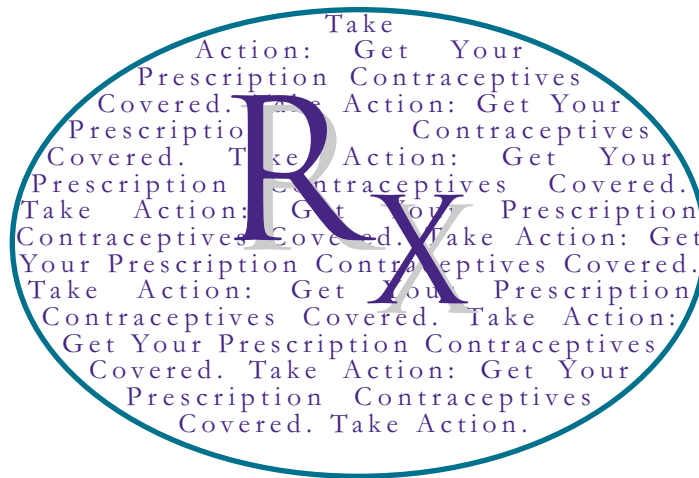


# CONTRACEPTIVE EQUITY LAWS IN YOUR STATE:

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KNOW YOUR RIGHTS—USE YOUR RIGHTS

*A CONSUMER GUIDE*



The National Women's Law Center is a Washington-based nonprofit organization working to expand opportunities and eliminate barriers for women and their families, with a major emphasis on women's health, education and employment opportunities and family economic security.

This 2007 Guide updates the work done in 2003 by Ikeita Cantu Hinojosa, Counsel, Judith C. Appelbaum, Vice President and Legal Director, and Virginia Davis, Fellow, of the National Women's Law Center, with assistance from Elizabeth McMahon and Kimberly Foster, Legal Interns. It was updated in August 2005 with assistance from Heather Goldner, Legal Intern, in May 2006 with assistance from Stacey I. Young, Fellow, and in August 2007 with assistance from Judith Waxman, Vice President for Health and Reproductive Rights, Paige Herwig, Fellow, and Gretchen Borchelt, Senior Counsel. This Guide would not have been possible without the generous financial support of the Deer Creek Foundation and John Merck Fund. Additional support was provided by the Robert Sterling Clark Foundation, Ford Foundation, Wallace Alexander Gerbode Foundation, Richard and Rhoda Goldman Fund, George Gund Foundation, William and Flora Hewlett Foundation, Huber Foundation, Moriah Fund, Open Society Institute, David and Lucile Packard Foundation, and Turner Foundation. Ms. Cantu Hinojosa's and Ms. Davis' work at the Center was made possible by the Women's Law and Public Policy Fellowship Program. Ms. Herwig's work at the Center was made possible by the Arthur Liman Public Interest Fellowship at Yale Law School. The statements and views expressed herein are solely the responsibility of the National Women's Law Center and do not necessarily represent the views or positions of the Center's funders.

**National Women's Law Center**

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# CONTRACEPTIVE EQUITY LAWS IN YOUR STATE:

## KNOW YOUR RIGHTS—USE YOUR RIGHTS A CONSUMER GUIDE

### INTRODUCTION AND OVERVIEW

Access to safe and reliable contraception is an essential component of health care for women, yet many health insurance plans exclude coverage for prescription contraceptives even while covering other prescription drugs and devices and preventive care. This gender gap in health care coverage is being challenged in a variety of ways. Legal rulings have established the principle that singling out contraceptive coverage for exclusion from an otherwise comprehensive employee health plan is unlawful sex discrimination in employment. Legislation is being considered in states all across the country, and in Congress, to specifically mandate contraceptive equity in health insurance coverage. And in 24 states so far, contraceptive equity measures have been enacted into law. These state laws are the focus of this Consumer Guide.

#### WHAT THIS GUIDE DOES

This Consumer Guide is intended to assist individuals across the country in asserting their rights under the new state contraceptive equity laws that guarantee health insurance coverage of prescription contraceptives in insurance policies that cover other prescription drugs and devices. The 24 states that currently have contraceptive equity laws are: Arizona, Arkansas, California, Connecticut, Delaware, Georgia, Hawaii, Illinois, Iowa, Maine, Maryland, Massachusetts, Missouri, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Oregon<sup>1</sup>, Rhode Island, Vermont, Washington, and West Virginia. The central provisions of these laws, and information on how you can exercise your rights under them, are set forth state-by-state in alphabetical order. At the end of this Guide is a chart that reviews the religious refusal clauses contained in some state contraceptive coverage laws.

#### WHAT THE CONTRACEPTIVE EQUITY LAWS DO

In general, each of the state contraceptive equity laws provides that a health insurance policy that is issued in that state, and that provides coverage for prescription drugs generally, must provide coverage for any prescription drug or device that has been approved by the United States Food and Drug Administration (FDA) for use as a contraceptive. Most also require that if an insurance policy provides coverage for outpatient health care services, it must provide coverage for outpatient contraceptive services, such as consultations, examinations, procedures, and other medical services. Most of the laws further provide that any deductible, copayment, or coinsurance that is applied to contraceptives may not be greater than the deductible, copayment, or coinsurance applied to other prescription drugs. Several of the laws mandate that the contraceptive coverage requirement applies to both the insured and the insured's covered spouse and other dependents. These laws are statutes passed by the legislature and signed into state law, except in Washington State, where the Insurance Commissioner issued an administrative rule mandating contraceptive equity.

It is important to be aware of limitations on the scope of these laws. The state contraceptive equity laws covered in this Guide apply to insurance policies regulated under state law. If you receive your insurance through an employer that insures its employees through a “self-funded” or “self-insured” plan—that is, where an employer uses its own funds to pay the health care claims of its employees rather than buying an insurance plan from an outside insurer—the state contraceptive equity law will not apply (even if an outside firm is hired by the employer to administer the plan). This is because the “self-funded” plans are considered

#### *States with Contraceptive Equity Laws*

ARIZONA  
ARKANSAS  
CALIFORNIA  
CONNECTICUT  
DELAWARE  
GEORGIA  
HAWAII  
ILLINOIS  
IOWA  
MAINE  
MARYLAND  
MASSACHUSETTS  
MISSOURI  
NEVADA  
NEW HAMPSHIRE  
NEW JERSEY  
NEW MEXICO  
NEW YORK  
NORTH CAROLINA  
OREGON  
RHODE ISLAND  
VERMONT  
WASHINGTON  
WEST VIRGINIA

<sup>1</sup> The Oregon law was signed by the governor in May 2007 and becomes effective January 1, 2008.

to be employer benefit plans that are governed by federal law<sup>2</sup> rather than state insurance laws. However, in such a case your *employer* is obligated to comply with applicable laws against sex discrimination in employment which, as explained below, can provide a separate basis for asserting your right to contraceptive coverage (see “What Other Rights You Have,” below).

As reflected in the state-by-state summaries below, some states have enacted religious refusal clauses—that is, exceptions to the contraceptive equity mandate for religious employers or insurers (or individuals enrolled in the plan) whose religious tenets prohibit the use of contraceptives. These laws define the scope of the religious exception in various ways. Included at the end of this Guide is a chart that provides information on how each state law with a religious refusal clause defines “religious employer.” The chart then applies that definition, explaining which employers would be exempt under the law and which would have to provide contraceptive coverage. It is important to note, however, that in some states with such a religious exception, the religious entity is

required to provide clear notice of its refusal to cover contraception; and in a few states, like New York and Hawaii, the law goes further and says that if your employer is covered by the religious exception, you have the right to purchase contraceptive coverage directly from the insurance company<sup>3</sup>. Some of the religious exceptions also specify that they do not apply if the prescription is ordered for reasons other than birth control, such as to address menopause symptoms, or if it is necessary to preserve the life or health of the person insured.

Finally, there are several states that mandate coverage of “family planning services” by HMOs, but do not appear to have interpreted these laws to require coverage of contraceptive drugs and devices. These states are: Minnesota, North Dakota, Ohio, Oklahoma, and Wyoming. In addition, Virginia and Texas<sup>4</sup> require insurers to offer contraceptive coverage as an employer option, but do not require employers to purchase this coverage. Similarly, Colorado, Idaho, and Kentucky require small-group and individual market carriers to offer standardized plans to employers that include coverage of contraceptives, but do not require employers to select these plans.

*State contraceptive equity laws require that health insurance policies covering prescription drugs must cover FDA-approved prescription contraceptive drugs and devices.*

## HOW TO IMPLEMENT YOUR RIGHTS UNDER THE CONTRACEPTIVE EQUITY LAWS

The state contraceptive equity laws are incorporated into state insurance laws, and they are administered and enforced in the same manner as other state insurance requirements, governing matters such as marketing practices, premiums that may be charged, and other consumer protections. The state regulations include provisions governing how complaints are handled when people do not receive the benefits they believe they are entitled to under their insurance plans. Typically, if you have a complaint about the exclusion of contraceptive coverage from your health insurance in a state with a contraceptive equity law, you may file a complaint with the state insurance department, which will then investigate the matter and attempt to resolve it with the insurance company. You may be required or urged to try to resolve the issue with your insurance company yourself before filing a complaint with the state insurance department.

The way to file such a complaint in each state is described below; often, it can be done by filing a form electronically. Once it receives a complaint, the insurance department will initially attempt to resolve the matter by informing the insurance company about the complaint and the relevant legal requirements. Because the contraceptive equity requirements are clear statutory mandates, disputes in this area are likely to be resolved quickly and without resort to formal enforcement action. But if the insurance department is unable to resolve the matter simply by contacting the insurance company and demanding compliance, it generally has the authority to take formal action to enforce the law, and may also be empowered to impose fines, penalties, or even suspension or revocation of the company’s license to do business in the state. An individual may also have the right to file a lawsuit for breach of her insurance contract or on other legal grounds.<sup>5</sup>

## WHAT OTHER RIGHTS YOU HAVE

Apart from the state contraceptive equity laws described in this Guide, there are federal and state anti-discrimination laws that may be invoked to obtain contraceptive coverage.

<sup>2</sup> The federal law, which you may hear discussed, is “ERISA,” the Employee Retirement Income Security Act, 29 U.S.C. §§ 1001- 1461 (1974).

<sup>3</sup> For more information on notice requirements, see the National Women’s Law Center’s report, *Truth or Consequences: Using Consumer Protection Laws to Expose Institutional Restrictions on Reproductive and Other Health Care*, <http://www.nwlc.org/pdf/TruthOrConsequences2003.pdf>.

<sup>4</sup> A Texas law applies to plans delivered, issued, or renewed after January 1, 2004. Tex. Ins. Code Ann. art. 3.80 (West 2006). For plans issued prior to that date, Texas has a comprehensive contraceptive equity law requiring that all health insurance plans issued in the state that offer prescription coverage include contraceptive coverage. TEX. INS. CODE ANN. art. 21.52L, §3 (West 2006).

<sup>5</sup> The information contained in this Guide was collected through online research, statutory review, and telephone interviews and correspondence with relevant state officials. Since few complaints under contraceptive equity laws have been filed to date, this Guide lays out how such complaints would ordinarily be handled based on the practices of each of the states in addressing other state insurance mandates.

## Federal Anti-Discrimination Law

The federal law against sex discrimination in employment, Title VII of the Civil Rights Act of 1964, 42 U.S.C. § 2000e-2(a)(1), has been interpreted to prohibit employers who offer otherwise comprehensive health benefits to their employees, including coverage of prescription drugs and devices generally, from excluding coverage of prescription contraceptives. This law covers all private employers with 15 or more employees, as well as state and local governments as employers. See U.S. Equal Employment Opportunity Commission, Commission Decision on Coverage of Contraception (Dec. 14, 2000), [www.eeoc.gov/docs/decision-contraception.html](http://www.eeoc.gov/docs/decision-contraception.html); *Erickson v. Bartell Drug Co.*, 141 F. Supp. 2d 1266 (W.D. Wash. 2001); *In re Union Pacific Railroad Employment Practices Litigation*, 378 F. Supp. 2d 1139 (D. Neb. 2005), *rev'd by* 479 F.3d 936 (8th Cir. 2007). Thus, if you obtain your health insurance through your employee benefits plan, and you work for a government or for a private employer with at least 15 employees, you have a right to contraceptive coverage under federal law if your plan covers other prescription drugs and devices. If you live in Arkansas, Iowa, Minnesota, Missouri, Nebraska, North Dakota, or South Dakota, a recent federal court decision may implicate your Title VII protection. *In re Union Pacific Railroad Employment Practices Litigation*, 479 F.3d 936 (8th Cir. 2007). For more information on how to assert this right, see the National Women's Law Center's guide for employees, *Take Action: Get Your Prescription Contraceptives Covered* at <http://www.nwlc.org/pill4us/index.cfm>.

*You may have a right to contraceptive coverage under a contraceptive equity law in your state (governing insurance plans), federal or state law against sex discrimination in employment (governing employers), or both.*

## State Anti-Discrimination Laws

Almost every state has a law against sex discrimination in employment along the same lines as federal law (Title VII). In light of the fact that Title VII has been interpreted as placing a contraceptive coverage requirement on employers who are covered by federal law, similar state laws should be interpreted in the same way, and already have been in three states: Wisconsin, Montana, and Michigan.

In Wisconsin, the state Attorney General has issued two opinions finding that contraceptive coverage is required by state law.<sup>6</sup> The Attorney General's opinions cite *Erickson* and the EEOC decision and holds that Wisconsin's Fair Employment Act should be interpreted, like Title VII, to require employers to include contraceptive coverage, and further that Wisconsin's law prohibiting sex discrimination in education applies the same principle to contraceptive coverage for students of Wisconsin colleges and universities.

The Montana Attorney General in 2006 ruled that Montana state law requires contraceptive coverage as well.<sup>7</sup> The Attorney General opinion cites *Erickson*, the *Union Pacific* district court decision, and the EEOC decision and holds that the Montana Human Rights Act, like Title VII, requires that employer benefit plans providing coverage for prescription drugs and other medical services must cover prescription contraception and related medical services. The Attorney General also found that Montana's "unisex" insurance law requires this coverage.

Most recently, in August 2006, the Michigan Civil Rights Commission determined that contraceptive coverage is required by the state's Elliott-Larsen Civil Rights Act (ELCRA).<sup>8</sup> The Commission discussed *Erickson*, the *Union Pacific* district court decision and the EEOC decision before ruling that the language of ELCRA clearly prohibits employers from excluding prescription contraceptive coverage from otherwise comprehensive health plans.

If you are not in one of the states with contraceptive equity laws or your plan is self-insured, and your employer is too small to be covered by Title VII, you may be able to invoke the state's sex discrimination law to obtain contraceptive coverage.

## IF YOU NEED HELP

If you would like assistance in exercising your rights under any of the applicable state or federal laws, please contact the National Women's Law Center. You may call our toll-free information line at 1-866-PILL4US, email us at [info@nwlc.org](mailto:info@nwlc.org), or go to our web page at [www.nwlc.org/pill4us/](http://www.nwlc.org/pill4us/) for materials that may be of assistance.

<sup>6</sup> Letter from Wisconsin Attorney General Peggy A. Lautenschlager to state Senator Gwendolynne Moore, October 17, 2003; Letter from Wisconsin Attorney General Peggy A. Lautenschlager to Secretary, Helene Nelson, Wisconsin Department of Health and Family Services, August 16, 2004.

<sup>7</sup> Opinion issued by Montana Attorney General Mike McGrath, Vol. 51, No. 16, March 28, 2006, available at <http://www.doj.mt.gov/resources/opinions2006/51-016.pdf>.

<sup>8</sup> Michigan Civil Rights Commission, Declaratory Ruling on Contraceptive Equity, August 21, 2006, available at [http://www.michigan.gov/documents/Declaratory\\_Ruling\\_7-26-06\\_169371\\_7.pdf](http://www.michigan.gov/documents/Declaratory_Ruling_7-26-06_169371_7.pdf).

## ARIZONA

**Contraceptive Coverage Requirement**

**Key Provisions.** Group health insurance policies issued in Arizona that provide coverage for prescription drugs must cover prescription drugs and devices approved by the FDA for use as contraceptives. The insurer may not impose deductibles, coinsurance, copayments, or other cost containment measures for contraceptive drugs that are greater than the deductibles, coinsurance, copayments, or other cost containment measures for other drugs. ARIZ. REV. STAT. ANN. § 20-826Y(1) (West 2006) (corporation); ARIZ. REV. STAT. ANN. § 20-1057.08A(1) (West 2006) (health care services organization); ARIZ. REV. STAT. ANN. § 20-1402L(1) (West 2006) (group disability policy); ARIZ. REV. STAT. ANN. § 20-1404U(1) (West 2006) (blanket disability policy); ARIZ. REV. STAT. ANN. § 20-2329A(1) (West 2006) (accountable health plan).

If the insurer provides coverage for outpatient health care services, it must provide coverage for outpatient contraceptive services, including consultations, examinations, procedures, and medical services. ARIZ. REV. STAT. ANN. § 20-826Y(2) (West 2006) (corporation); ARIZ. REV. STAT. ANN. § 20-1057.08A(2) (West 2006) (health care services organization); ARIZ. REV. STAT. ANN. § 20-1402L(2) (West 2006) (group disability policy); § 20-1404U(2) (West 2006) (blanket disability policy); ARIZ. REV. STAT. ANN. § 20-2329A(2) (West 2006) (accountable health plan). These provisions do not apply to health policy plans issued to a small business. H.B. 2698, 47th Leg., 2nd Reg. Sess. (Ariz. 2006). “Small business” means a business that employs at least two but not more than twenty-five persons at any time during the most recent calendar year and that has been uninsured for at least six months. H.B. 2698, 47th Leg., 2nd Reg. Sess. (Ariz. 2006).

**Religious Refusal.** A religious employer (as defined in the statute) whose religious tenets prohibit the use of contraceptive methods may require that the insurer provide a plan that excludes coverage of contraceptive methods. A religious employer that invokes this exemption must provide to prospective subscribers, before they enroll in the plan, written notice of its refusal to cover prescription contraceptive methods for religious reasons. ARIZ. REV. STAT. ANN. § 20-826Z (West 2006) (corporation); ARIZ. REV. STAT. ANN. §§ 20-1057.08B-C (West 2006) (health care services organization); ARIZ. REV. STAT. ANN. § 20-1402M (West 2006) (group disability policy); ARIZ. REV. STAT. ANN. § 20-1404V (West 2006) (blanket disability policy); ARIZ. REV. STAT. ANN. § 20-2329B-C (West 2006) (accountable health plan).

The religious exception does not permit the exclusion of coverage for prescription contraceptive methods ordered for medical indications other than to prevent an unintended pregnancy. An insurer may require the subscriber to first pay for the prescription and then submit a claim to the insurer along with evidence that the prescription is for a noncontraceptive purpose, and the insurer may charge an administrative fee for handling these claims. ARIZ. REV. STAT. ANN. § 20-826Z (West 2006) (corporation); ARIZ. REV. STAT. ANN. §§ 20-1057.08D (West 2006) (health care services organization); ARIZ. REV. STAT. ANN. § 20-1402M (West 2006) (group disability policy); ARIZ. REV. STAT. ANN. § 20-1404V (West 2006) (blanket disability policy); ARIZ. REV. STAT. ANN. § 20-2329D (West 2006) (accountable health plan).

A religious employer may not discriminate against an employee who independently chooses to obtain insurance coverage or prescriptions for contraceptives from another source. ARIZ. REV. STAT. ANN. § 20-826Z (West 2006) (corporation); ARIZ. REV. STAT. ANN. §§ 20-1057.08E (West 2006) (health care services organization); ARIZ. REV. STAT. ANN. § 20-1402M (West 2006) (group disability policy); ARIZ. REV. STAT. ANN. § 20-1404V (West 2006) (blanket disability policy); ARIZ. REV. STAT. ANN. § 20-2329E (West 2006) (accountable health plan).

**Filing a Complaint**

Before filing a complaint, the Arizona Insurance Department suggests contacting your insurance agent to see if you can resolve the problem. If you are still unable to obtain contraceptive coverage, you may file a complaint by mailing or faxing a Request for Assistance form to the Department, and include copies of all relevant documents with your complaint.

**Online Request for Assistance Form:** [http://www.id.state.az.us/forms/Request\\_For\\_Assistance\\_1-06.pdf](http://www.id.state.az.us/forms/Request_For_Assistance_1-06.pdf)

**Contact Information**

Arizona Department of Insurance  
Consumers Affairs Division  
2910 North 44th Street, Suite 210  
Phoenix, Arizona 85018-7256  
Toll-Free In State: (800) 325-2548  
Email: [consumers@id.state.az.us](mailto:consumers@id.state.az.us)  
Web site: <http://www.id.state.az.us/>

**Phoenix Area:**  
Phone: (602) 912-8444  
Fax: (602) 954-7008

**Tucson Area :**  
Phone: (520) 628-6370  
Fax: (520) 628-6633

## ARKANSAS

**Contraceptive Coverage Requirement**

*Key Provisions.* Every individual or group plan, policy, or contract for health care services that is delivered, issued for delivery, issued, executed, or renewed in Arkansas, including contracts executed by Arkansas on behalf of state employees, that provides coverage for prescription drugs on an outpatient basis must provide coverage for prescribed drugs or devices approved by the FDA for use as a contraceptive. ARK. CODE ANN. § 23-79-1103(a) (2005).

No insurer may impose upon any person receiving prescription contraceptives any copayment, coinsurance payment, or fee that is not equally imposed upon all individuals receiving benefits for prescription drugs in the same benefit category, class, coinsurance level, or copayment level. Additionally, there may be no reduction in allowable reimbursement for prescription drug benefits imposed upon the enrollee receiving prescription contraceptives. ARK. CODE ANN. § 23-79-1104(a)(1)-(2) (2005).

*Religious Refusal.* No religious employer (as defined in the statute) is required to comply with this law. ARK. CODE ANN. § 23-79-1104(b)(3) (2005); ARK. CODE ANN. § 23-79-1102(3)(A)-(C) (2005) (religious employer).

**Filing a Complaint**

If the problem cannot be resolved directly with the company, you can file a written complaint through the Consumer Services Division of the Arkansas Insurance Department either by writing a letter, requesting a Complaint Form, or submitting the on-line form. Regardless of how the complaint is filed, the following information should be included: name of insurance company, policy and/or claim number, name of insured person, name, address, and telephone number of the person filing the complaint, brief description of the reason for filing the complaint, agent or adjuster's name, and the date of occurrence.

Online instructions and Complaint Form: [http://www.insurance.arkansas.gov/Administration/file\\_a\\_complaint.html](http://www.insurance.arkansas.gov/Administration/file_a_complaint.html)

**Contact Information**

Arkansas Insurance Department  
Consumer Services Division  
1200 West Third Street  
Little Rock, AR 72201-1804  
Phone: (501)371-2649  
Toll-Free: (800)852-5494  
Fax: (501)371-2640  
E-mail: [Insurance@arkansas.gov](mailto:Insurance@arkansas.gov)  
Web site: <http://insurance.arkansas.gov/>

# CALIFORNIA

## **Contraceptive Coverage Requirement**

*Key Provisions.* Every individual or group health insurance policy that is issued, amended, renewed, or delivered in California and that provides coverage for outpatient prescription drug benefits must include coverage for a variety of FDA-approved prescription contraceptive methods, as designated by the insurer, under the same terms and conditions as are applicable to all other benefits. CAL. INS. CODE § 10123.196(a)(1) (West 2006); CAL. INS. CODE § 10198.6(a) (West 2006). If an insured's health care provider determines that none of the methods designated by the insurer is medically appropriate for the insured's medical or personal history, the insurer must provide coverage for some other FDA-approved prescription contraceptive method prescribed by the patient's health care provider. CAL. INS. CODE § 10123.196(a)(1) (West 2006).

Outpatient prescription coverage with respect to an insured must be identical for an insured's covered spouse and covered non-spouse dependents. CAL. INS. CODE § 10123.196(a)(2) (West 2006).

*Religious Refusal.* A religious employer (as defined in the statute) may request a policy without coverage for contraceptive methods that are contrary to the employer's religious tenets. If so requested, a policy must be provided without coverage for such contraceptive methods. Once an offer of employment has been made and before a prospective employee commences employment, every religious employer that invokes this exemption must provide a prospective employee written notice listing the contraceptive health care services the employer refuses to cover for religious reasons. CAL. INS. CODE § 10123.196(d) (West 2006); CAL. INS. CODE § 10123.196(d)(2) (West 2006).

The religious exception does not exclude coverage for prescription contraceptive supplies ordered for reasons other than contraceptive purposes, such as decreasing the risk of ovarian cancer or eliminating symptoms of menopause, or for prescription contraception that is necessary to preserve the life or health of an insured. CAL. INS. CODE § 10123.196(e) (West 2006).

## **Filing a Complaint**

You are directed to contact your insurance company, agent or broker in an effort to resolve the issue before filing a Request for Assistance with the California Department of Insurance. If you are unable to resolve the problem, you may file a Request for Assistance form and submit it online or mail it to the Department. The request will be assigned within the office and you will be contacted with instructions about how to submit supporting documentation. Please see the online instructions for a fuller description of the complaint process.

Instructions for Request for Assistance Form: <http://www.insurance.ca.gov/contact-us/0200-file-complaint/index.cfm>

Online Request for Assistance: [https://cdinswww.insurance.ca.gov/pls/rfa\\_rfa/irfa\\_fhd\\$irfas\\_en.querylist?z\\_action=INSERT&z\\_chk=0](https://cdinswww.insurance.ca.gov/pls/rfa_rfa/irfa_fhd$irfas_en.querylist?z_action=INSERT&z_chk=0)

Printable Request for Assistance Form: <http://www.insurance.ca.gov/contact-us/0200-file-complaint/upload/Printable-RFAENG12.05.pdf>

## **Contact Information**

California Department of Insurance  
Consumer Services and Market Conduct Branch  
Consumer Services Division  
300 South Spring Street, South Tower  
Los Angeles, CA 90013  
Phone: (213) 897-8921  
Toll-Free in CA: (800) 927-HELP (4357)  
Web site: <http://www.insurance.ca.gov>



## CONNECTICUT

**Contraceptive Coverage Requirement**

*Key Provisions.* Each individual and group health insurance policy delivered, issued for delivery, renewed, or continued in Connecticut that provides coverage for outpatient prescription drugs approved by the FDA must include coverage for prescription contraceptive methods approved by the FDA. CONN. GEN. STAT. ANN. § 38a-503e(a) (West 2006) (individual policies); CONN. GEN. STAT. ANN. § 38a-530e(a) (West 2006) (group policies).

*Religious Refusal.* Connecticut's law has a religious exception that allows an insurance company to issue to a religious employer (as defined in the statute) a group or individual policy that excludes coverage for prescription contraceptive methods that are contrary to the religious employer's bona fide religious tenets. In addition, an individual may request that an insurer issue to the individual a health insurance policy that excludes coverage for prescription contraceptive methods if he or she states in writing that prescription contraceptive methods are contrary to his or her religious or moral beliefs. CONN. GEN. STAT. ANN. § 38a-503e(b)(1)-(2) (West 2006); CONN. GEN. STAT. ANN. § 38a-503e(f) (West 2006) (individual policies); CONN. GEN. STAT. ANN. § 38a-530e(b)(1)-(2) (West 2006); CONN. GEN. STAT. ANN. § 38a-503e(f) (West 2006); CONN. STAT. ANN. § 38a-503e(b)(1) (West 2006) (group policies).

Any health insurance policy issued pursuant to a religious exception must provide written notice to each insured or prospective insured that prescription contraceptive methods are excluded from coverage for religious reasons. CONN. GEN. STAT. ANN. § 38a-503e(c) (West 2006) (individual policies); CONN. GEN. STAT. ANN. § 38a-530e(c) (West 2006) (group policies).

The religious exception does not permit the exclusion of coverage for prescription drugs ordered for reasons other than contraceptive purposes. CONN. GEN. STAT. ANN. § 38a-503e(d) (West 2006) (individual policies); CONN. GEN. STAT. ANN. § 38a-530e(d) (West 2006) (group policies).

If an insurer itself is owned, operated, or substantially controlled by a religious organization, and has religious or moral tenets that conflict with the contraceptive coverage requirement, it may provide for the coverage of prescription contraceptive methods as required by the state law through another entity. The cost, terms and availability of such coverage may not differ from the cost, terms and availability of other prescription coverage offered to the insured. CONN. GEN. STAT. ANN. § 38a-503e(e) (West 2006) (individual policies); CONN. GEN. STAT. ANN. § 38a-530e (e) (West 2006) (group policies).

**Filing a Complaint**

You may file a Consumer Complaint with the Connecticut Insurance Department, either by filling out a form online or writing a letter to the Department that contains a full description of the problem. If you send a letter, you are instructed to include your name, the name of your health insurance provider, the policy name and number, claim number, and copies of all relevant documents.

Online Complaint Form: <http://www.ct.gov/cid/lib/cid/cons.rtf>

Complaint Form in PDF version: <http://www.ct.gov/cid/lib/cid/cons.pdf>

**Contact Information**

State of Connecticut Insurance Department  
Consumer Affairs Division  
P.O. Box 816  
Hartford, CT 06142-0816  
Phone: (860) 297-3900  
Toll-Free: (800) 203-3447  
Fax: (203) 297-3872  
Web site: <http://www.ct.gov/cid/site/default.asp>

## DELAWARE

**Contraceptive Coverage Requirement**

*Key Provisions.* All group and blanket health issuance policies that are delivered or issued for delivery in Delaware and that provide coverage for outpatient prescription drugs must provide coverage, under terms and conditions applicable to other benefits, for prescription contraceptive drugs and devices approved by the FDA and for outpatient contraceptive services. An insurer may not impose a copayment, coinsurance requirement, or deductible for directly accessed gynecological services related to prescription contraceptives, unless such additional cost-sharing is imposed for access to health care practitioners for other types of healthcare. DEL. CODE ANN tit. 18, § 3559(a)-(b) (2000).

The contraceptive coverage requirement applies to the enrollee and all insured parties covered by the health policy. DEL. CODE ANN tit. 18, § 3559(c) (2000).

*Religious Refusal.* Upon the request of a religious employer, an insurer must grant an exclusion from contraceptive coverage under the policy, plan, or contract if the required coverage conflicts with the religious organization's bona fide religious beliefs and practices. A religious employer that obtains an exclusion must provide its employees reasonable and timely notice of the exclusion. DEL. CODE ANN tit. 18, § 3559(d) (2000).

**Filing a Complaint**

To file a complaint, you may call, email, or send a Request for Assistance to the Delaware Insurance Department. You will need to provide the Department with your name, address, daytime phone number, name of the insurance company, and a short description of the complaint. If you mail your request, you are asked to include copies of any relevant documents. You should receive an acknowledgment of your complaint within 48 hours.

Online Request for Assistance Form: <http://www.state.de.us/inscom/departments/consumer/complaintform.shtml>

Request for Assistance Form in PDF Version: <http://www.state.de.us/inscom/departments/consumer/complaintform.pdf>

**Contact Information**

Delaware Department of Insurance  
Consumer Services  
841 Silver Lake Blvd.  
Dover, DE 19904  
Phone: (302)739-4251  
Toll-Free in DE: (800) 282-8611  
Fax: (302) 739-6278  
Email: [consumer@deins.state.de.us](mailto:consumer@deins.state.de.us)  
Web site: <http://www.state.de.us/inscom>

## GEORGIA

**Contraceptive Coverage Requirement**

*Key Provisions.* Every individual or group health plan, policy or contract that is delivered, issued, executed, or renewed in Georgia or approved for issuance or renewal in Georgia by the state Insurance Commissioner, and that provides coverage for prescription drugs on an outpatient basis, must provide coverage for any prescription drug or device approved by the FDA for use as a contraceptive. GA. CODE ANN. § 33-24-59.6(c) (West 2006); GA. CODE ANN. § 33-24-59.6(b)(1) (West 2006) (health benefit policy).

No insurer may impose upon any person receiving prescription contraceptive benefits any copayment, coinsurance payment, or fee that is not equally imposed upon all individuals in the same benefit category, class, coinsurance level, or copayment level receiving benefits for prescription drugs, and no insurer may reduce the allowable reimbursement for prescription drug benefits for any person receiving prescription contraceptive benefits. GA. CODE ANN. § 33-24-59.6(d)(1)-(2) (West 2006).

**Filing a Complaint**

To file a complaint, you may either call the Consumer Services Division of the Georgia Insurance and Fire Safety Commissioner or submit a complaint online. There are separate online forms depending on whether you have an HMO/PPO or group health insurance.

Online Request for Assistance Form for HMO/PPO: <http://www.inscomm.state.ga.us/ABOUT/ComplaintEmail.aspx?T=ECM>

Online Request for Assistance Form for Group Health Insurance: <http://www.inscomm.state.ga.us/ABOUT/ComplaintEmail.aspx?T=ECG>

**Contact Information**

Consumer Services Division  
Georgia Insurance and Fire Safety Commissioner  
Two Martin Luther King, Jr. Dr.  
West Tower, Suite 704  
Atlanta, GA 30334  
Phone: (404) 656-2070  
Toll-Free in GA: (800) 656-2298  
TDD/TTY: (404) 656-4031  
Fax: (404) 657-8542  
Web site: <http://www.inscomm.state.ga.us>

## HAWAII

**Contraceptive Coverage Requirement**

*Key Provisions.* Each employer group health policy, contract, plan, or agreement issued or renewed in Hawaii must include coverage for prescription contraceptive drugs and devices approved by the FDA and for outpatient contraceptive services for the subscriber or any dependent of the subscriber who is covered by the policy. HAW. REV. STAT. ANN. § 431:10A-116.6(a) (West 2006); HAW. REV. STAT. ANN. § 432:1-604.5(a) (West 2006). All policies that provide prescription contraceptive drugs and devices and outpatient contraceptive services cannot exclude any prescription contraceptive drugs or devices or impose any unusual copayment, charge, or waiting requirement for a contraceptive drug or device. HAW. REV. STAT. ANN. § 431:10A-116.6(b) (West 2006); HAW. REV. STAT. ANN. § 432:1-604.5(b) (West 2006).

Insurers must provide coverage for at least one brand of monophasic, multiphasic, and progestin-only contraceptives, and an insured person may receive coverage for a different brand of oral contraceptives only if the covered brands have resulted in an adverse drug reaction or if the insured person has not used the covered brands and the prescribing physician believes that, based on the insured person's past medical history, the covered brands would cause an adverse drug reaction. HAW. REV. STAT. ANN. § 431:10A-116.6(c) (West 2006); HAW. REV. STAT. ANN. § 432:1-604.5(c) (West 2006).

*Religious Refusal.* A religious employer (as defined in the statute) may request a health insurance plan without coverage for contraceptive drugs, devices, or services that are contrary to the religious employer's religious tenets. If so requested, the insurer must provide a health insurance plan without such coverage. HAW. REV. STAT. ANN. § 431:10A-116.7(b) (West 2006).

Each religious employer that invokes the exemption must: provide written notice to enrollees upon enrollment with the plan, listing the contraceptive health care services the employer refuses to cover for religious reasons; provide written information describing how an enrollee may directly access contraceptive services and supplies in an expeditious manner; and ensure that enrollees who are refused contraceptive services and supplies have prompt access to contraceptive information. HAW. REV. STAT. ANN. § 431:10A-116.7(c) (West 2006).

The religious exception does not permit the exclusion of coverage for prescription contraceptive supplies ordered for reasons other than contraceptive purposes, such as decreasing the risk of ovarian cancer or eliminating symptoms of menopause, or for prescription contraception that is necessary to preserve the life or health of an enrollee. HAW. REV. STAT. ANN. § 431:10A-116.7(d) (West 2006).

Health insurers must allow enrollees in a health plan exempted for religious reasons to directly purchase coverage of contraceptive supplies and outpatient contraceptive services. The enrollee's cost of purchasing such coverage may not exceed the enrollee's pro rata share of the price the group purchaser would have paid for such coverage had the employer not invoked a religious exemption. HAW. REV. STAT. ANN. § 431:10A-116.7(e) (West 2006).

**Filing a Complaint**

Before filing a complaint, the Hawaii Insurance Division instructs you to exhaust all internal appeals with the insurance company. If you are unable to resolve the problem, you may file a complaint with the Division's Investigation Branch. If you do not receive a response within 30-45 days, you should call the Division.

Online Complaint Form and Instructions: [http://www.hawaii.gov/dcca/areas/ins/consumer/filing\\_a\\_complaint/c\\_i\\_form](http://www.hawaii.gov/dcca/areas/ins/consumer/filing_a_complaint/c_i_form)

**Contact Information**

State of Hawaii Department of Commerce and Consumer Affairs  
Insurance Division  
Investigation Branch  
250 South King St., 5th Floor  
P.O. Box 3614  
Honolulu, HI 96813  
Phone: (808) 586-2790  
Fax: (808) 587-5379  
Web site: <http://www.hawaii.gov/dcca/areas/ins>

## ILLINOIS

**Contraceptive Coverage Requirement**

*Key Provisions.* An individual or group health insurance policy that is amended, delivered, issued, or renewed in Illinois, and that provides coverage for outpatient services and outpatient prescription drugs or devices, must provide coverage for all outpatient contraceptive services and all outpatient contraceptive drugs and devices approved by the FDA. 215 ILL. COMP. STAT. ANN. 5/356z.4(a) (West 2005).

An insurer may not impose any deductible, coinsurance, waiting period, or other cost-sharing or limitation that is greater than that required for any outpatient service or outpatient prescription drug or device otherwise covered by the policy. 215 ILL. COMP. STAT. ANN. 5/356z.4(a) (West 2005).

An insurance company is not required to cover services related to abortion or permanent sterilization that requires a surgical procedure. 215 ILL. COMP. STAT. ANN. 5/356z.4(c)-(d) (West 2005).

**Filing a Complaint**

Before filing a complaint, the Illinois Department of Insurance directs you to bring the problem to the attention of the insurance company or agent. If you are not satisfied with the results, you may submit a complaint in writing, either by mail or by using the on-line complaint form. See the online instructions for a fuller description of the complaint process.

Online Complaint Process Instructions: [http://www.idfpr.com/DOI/Complaints/Understand\\_Complaint\\_process.asp](http://www.idfpr.com/DOI/Complaints/Understand_Complaint_process.asp)

Online Complaint Submission Forms: <https://www.ins.state.il.us/WebComplaints.nsf/Mainlink?OpenForm>

Complaint Form in PDF Version: [http://www.idfpr.com/DOI/Complaints/hard\\_copy\\_complaint.pdf](http://www.idfpr.com/DOI/Complaints/hard_copy_complaint.pdf)

**Contact Information****Springfield**

Illinois Department of Insurance  
320 W. Washington Street  
Springfield, IL 62767-0001  
Phone: (217) 782-4515  
Fax: (217) 558-2083  
TDD: (217) 524-4872

**Chicago**

Illinois Department of Insurance  
James R. Thompson Center  
100 W. Randolph St., Suite 5-570  
Chicago, IL 60601-3251  
Phone: (312) 814-2427  
Fax: (312) 814-5435  
TDD: (312) 814-2603

Toll-Free in IL: (877) 527-9431

Toll-Free Consumer Assistance Hotline: (866) 445-5364

Email: [director@ins.state.il.us](mailto:director@ins.state.il.us)

Web site: <http://www.idfpr.com/DOI/Default2.asp>

## IOWA

**Contraceptive Coverage Requirement**

*Key Provisions.* An individual or group health insurance policy or contract issued in Iowa may not exclude or restrict benefits for FDA-approved prescription contraceptive drugs or devices, or their generic equivalents, if such policy or contract provides benefits for other outpatient prescription drugs or devices, nor may an individual or group health insurance policy or contract exclude or restrict outpatient contraceptive services to prevent conception if such policy or contract provides benefits for other outpatient services provided by a health care professional. In the case of an individual policy or contract, the individual policyholder may reject the contraceptive coverage provision at his or her option. IOWA CODE ANN. § 514C.19(1) (West 2006); IOWA CODE ANN. § 514C.19(5)-(6) (West 2006).

A deductible, coinsurance, or copayment for benefits for prescription contraceptive drugs, devices, or outpatient services may not be greater than any deductible, coinsurance, or copayment for any other outpatient prescription drug, device, or outpatient health care service that is covered under the policy. IOWA CODE ANN. § 514C.19(3) (West 2006).

Coverage of benefits for experimental or investigational contraceptive drugs and devices or services is required only to the extent that the policy or contract provides coverage for other experimental or investigational outpatient prescription drugs, devices, or outpatient health care services. IOWA CODE ANN. § 514C.19(4) (West 2006).

Iowa law prohibits insurers from excluding contraceptive users from coverage, penalizing health care providers for providing contraceptives, or offering incentives not to accept or provide contraceptive coverage to individuals or health care providers. IOWA CODE ANN. § 514C.19(2) (West 2006).

**Filing a Complaint**

Before filing a complaint, the Iowa Insurance Division suggests that you contact your insurance company, agent or broker in an effort to resolve the issue. If you are not able to resolve the problem, you may call the Consumer Affairs Bureau of the Iowa Insurance Division at the number listed below. The Bureau will evaluate your claim and may ask you to file a written complaint.

Online Instructions for Filing a Complaint: <http://www.iid.state.ia.us/complaints/index.asp?linksback=consumers>

Online Complaint Form: [http://www.iid.state.ia.us/about\\_us/consumer/complaints/online.asp?linksback=complaintfiling](http://www.iid.state.ia.us/about_us/consumer/complaints/online.asp?linksback=complaintfiling)

Complaint Form in PDF Version: <http://www.iid.state.ia.us/docs/complaintform.pdf>

**Contact Information**

Iowa Insurance Division  
 Consumer Affairs Bureau  
 330 Maple St.  
 Des Moines, IA 50319  
 Phone: (515) 281-5705  
 Toll-Free: (877) 955-1212  
 Fax: (515) 281-3059  
 Email: [consumer.affairs@iid.state.ia.us](mailto:consumer.affairs@iid.state.ia.us)  
 Web site: <http://www.iid.state.ia.us/>

## MAINE

**Contraceptive Coverage Requirement**

*Key Provisions.* All individual or group health insurance plans issued in Maine that provide coverage for prescription drugs must provide coverage for all prescription contraceptives approved by the FDA, and plans that cover outpatient medical services must cover outpatient contraceptive services, to the same extent that coverage is provided for other prescription drugs or outpatient medical services. This requirement does not apply to prescription drugs or devices that are designed to terminate a pregnancy. ME. REV. STAT. ANN. tit. 24, § 2332-J(1) (West 2006) (individual and group nonprofit hospital and medical services and health care plans); Me. Rev. Stat. Ann. tit. 24-A, § 2756(1) (West 2006) (individual health policies and contracts); ME. REV. STAT. ANN. tit. 24, § 2847-G(1) (West 2006) (group insurance policies and contracts); ME. REV. STAT. ANN. tit. 24, § 4247(1) (West 2006) (health maintenance organization individual and group health contracts).

*Religious Refusal.* A religious employer (as defined in the statute) may request, and an insurer must grant, an exclusion under the policy or contract for contraceptive coverage if such coverage conflicts with the religious employer's bona fide religious beliefs and practices. A religious employer that obtains a religious exclusion must provide prospective insureds and those individuals insured under its policy written notice of the exclusion. The religious exclusion does not permit the exclusion of coverage for contraceptive drugs prescribed for reasons other than contraceptive purposes or for prescription contraception that is necessary to preserve the life or health of a covered person. ME. REV. STAT. ANN. tit. 24, § 2332-J(2) (individual and group nonprofit hospital and medical services and health care plans); ME. REV. STAT. ANN. tit. 24-A, § 2756(2) (West 2006) (individual health policies and contracts); ME. REV. STAT. ANN. tit. 24, § 2847-G(2) (West 2006) (group insurance policies and contracts); ME. REV. STAT. ANN. tit. 24, § 4247(2) (West 2006) (health maintenance organization individual and group health contracts).

**Filing a Complaint**

It is not necessary to exhaust the internal review process with the insurance company, agent or broker before filing a complaint with the Maine Bureau of Insurance. You may file a complaint by sending a complaint form to the Bureau. The investigator assigned to your complaint will send you a letter within a week of the date the complaint is received.

Online Complaint Form: [http://www.state.me.us/pfr/ins/eform\\_chcd.htm](http://www.state.me.us/pfr/ins/eform_chcd.htm)

Complaint Form in PDF Version: <http://mainegov-images.informe.org/pfr/ins/documents/CombinedComplaint%20Form.pdf>

**Contact Information**

Maine Department of Professional & Financial Regulation  
Bureau of Insurance  
34 State House Station  
Augusta, ME 04333  
Phone: (207) 624-8475  
Toll-Free in ME: (800) 300-5000  
TDD: (207) 624-8563  
Fax: (207) 624-8599  
Web site: [http://www.state.me.us/pfr/ins/ins\\_index.htm](http://www.state.me.us/pfr/ins/ins_index.htm)

## MARYLAND

**Contraceptive Coverage Requirement**

*Key Provisions.* Insurers, nonprofit health service plans, and health maintenance organizations that provide coverage for prescription drugs under individual or group health insurance policies or contracts issued or delivered in Maryland must provide coverage for any contraceptive drug or device that is approved by the FDA for use as a prescription contraceptive. Insurers must also provide coverage for any medically necessary examination associated with the use of a contraceptive drug or device. MD. CODE ANN., INS. § 15-826 (a) (West 2006); MD. CODE ANN., INS. § 15-826(b)(1)-(2) (West 2006) .

An insurer may not impose a different copayment or coinsurance for a contraceptive drug or device than is imposed for any other prescription. MD. CODE ANN., INS. § 15-826(b)(3) (West 2006).

*Religious Refusal.* A religious organization (as defined in the law) may request that the insurer provide a plan that excludes coverage of contraceptive methods, and the insurer must do so, if the required coverage conflicts with the religious organization's bona fide religious beliefs and practices. A religious organization that obtains an exclusion must provide its employees reasonable and timely notice of the exclusion. MD. CODE ANN., INS. § 15-826(c) (2006); MD. REGS. CODE tit. 31.10.15.02(B)(43).

**Filing a Complaint**

Before filing a complaint, you are directed to exhaust all internal appeals with your insurance carrier. If you are still unable to obtain contraceptive coverage, you may file a complaint with the Maryland Insurance Administration. You must print and send both the complaint form and a medical release form, which allows your insurance company to talk about your medical records with the Administration staff.

Online Complaint Instructions: <http://www.mdinsurance.state.md.us/jsp/consumer/FileComplaint.jsp10>

Online Complaint Form: and Medical Release Form <http://www.mdinsurance.state.md.us/documents/LH-AGComplaintForm-MedRel.pdf>

**Contact Information**

Maryland Insurance Administration  
Attn: Consumer Complaint Investigation  
Life and Health/Appeals and Grievance  
525 St. Paul Place  
Baltimore, MD 21202  
Phone: (410) 468-2000  
Toll-Free nationwide: (800) 492-6116  
TTY: (800) 735-2258  
Fax: (410) 468-2270  
Web site: <http://www.mdinsurance.state.md.us/>



# MASSACHUSETTS

## **Contraceptive Coverage Requirement**

*Key Provisions.* An individual or group plan that is delivered, issued, or renewed within or outside Massachusetts and that provides benefits for prescription drugs, devices, and outpatient services must provide to residents of Massachusetts, and to persons having a principal place of employment within Massachusetts, benefits for prescription contraceptive drugs, devices, and outpatient services. MASS. GEN. LAWS ANN. ch. 175 § 47W(a)-(b) (West 2006) (accident and sickness insurance); MASS. GEN. LAWS ANN. ch. 176A § 8W(a)-(b) (West 2006) (hospital service plan); MASS. GEN. LAWS ANN. ch. 176B § 4W(a)-(b) (West 2006) (medical service agreement); MASS. GEN. LAWS ANN. ch. 176G § 4O(a)-(b) (West 2006) (health maintenance contract).

Insurers must provide prescription contraceptive drugs, devices, and outpatient services under the same terms and conditions as for other prescription drugs, devices, and outpatient services. MASS. GEN. LAWS ANN. ch. 175 § 47W(a)-(b) (West 2006) (accident and sickness insurance); MASS. GEN. LAWS ANN. ch. 176A § 8W(a)-(b) (West 2006) (hospital service plan); MASS. GEN. LAWS ANN. ch. 176B § 4W(a)-(b) (West 2006) (medical service agreement); MASS. GEN. LAWS ANN. ch. 176G § 4O(a)-(b) (West 2006) (health maintenance contract).

*Religious Refusal.* The Massachusetts contraceptive coverage law does not apply to health insurance plans purchased by an employer that is a church or qualified church-controlled organization as defined in the law. MASS. GEN. LAWS ANN. ch. 175 § 47W(c) (West 2006) (accident and sickness insurance); MASS. GEN. LAWS ANN. ch. 176A § 8W(c) (West 2006) (hospital service plan); MASS. GEN. LAWS ANN. ch. 176B § 4W(c) (West 2006) (medical service agreement); MASS. GEN. LAWS ANN. ch. 176G § 4O(c) (West 2006) (health maintenance contract).

## **Filing a Complaint**

You may send a complaint form to the Massachusetts Division of Insurance. You should include copies of all relevant documents with your form.

Complaint Form and Instructions: [http://www.mass.gov/doi/Consumer/css\\_complaint\\_form.PDF](http://www.mass.gov/doi/Consumer/css_complaint_form.PDF)

## **Contact Information**

Commonwealth of Massachusetts  
Division of Insurance  
One South Station, 5th Floor  
Boston, MA 02110  
Phone: (617) 521-7777  
TDD: (617) 521-7490  
Fax: (617) 521-7772  
Web site: <http://www.state.ma.us/doi>

## MISSOURI

**Contraceptive Coverage Requirement**

**Key Provisions.** Each health carrier or health benefit plan delivered, issued for delivery, continued, or renewed for individuals or groups in Missouri that provides coverage for pharmaceutical benefits must provide coverage for FDA-approved contraceptives either at no charge or at the same level of deductible, coinsurance, or copayment as any other covered drug. MO. ANN. STAT. § 376.1199-1(4) (West 2006); MO. ANN. STAT. § 376.1350(18) (West 2006) (health benefit plan); MO. ANN. STAT. § 376.1350(22) (West 2006) (health carrier). “Contraceptives” is defined to exclude all drugs and devices intended to induce an abortion, but there is no exclusion for any drugs or devices prescribed for reasons other than contraceptive or abortion purposes. MO. ANN. STAT. § 376.1199-1(4) (West 2006).

**Religious Refusal.** A health insurance carrier may issue a plan that excludes contraceptives to a person or entity (such as an employer) if the use or provision of such contraceptives is contrary to the moral, ethical or religious beliefs or tenets of that person or entity. MO. ANN. STAT. § 376.1199-4(1) (West 2006).

An individual enrollee who is a member of a group health benefit plan, and who states that the use or provision of contraceptives is contrary to his or her moral, ethical or religious beliefs, may be issued a policy that excludes coverage for contraceptives. MO. ANN. STAT. § 376.1199-4(2) (West 2006).

In addition, a health insurance carrier itself is exempt from the contraceptive coverage requirement if it is owned, operated, or controlled in substantial part by an entity that is operated pursuant to moral, ethical or religious tenets that are contrary to the use or provision of contraceptives. Unless the insurance carrier is itself exempt, the carrier must allow enrollees in a plan that excludes coverage for contraceptives to purchase a plan that includes such coverage. MO. ANN. STAT. § 376.1199-4(3); § 376.1199-4(5) (West 2006).

A health benefit plan issued pursuant to a religious exception must provide clear written notice: whether coverage for contraceptives is or is not included; that an enrollee who is a member of a group health benefit plan with coverage for contraceptives may decline coverage for contraceptives; and that an enrollee who is a member of a group health benefit plan without coverage for contraceptives may purchase coverage for contraceptives. MO. ANN. STAT. § 376.1199-6 (West 2006).

A health carrier may not disclose the names of any enrollees who either refuse or purchase contraceptive coverage. Health carriers and employers may not discriminate against an enrollee for refusing or taking prescription contraceptives. MO. ANN. STAT. § 376.1199-7 (West 2006).

**Filing a Complaint**

You may file a complaint with the Consumer Services Division of the Department of Insurance at any time during the internal appeal or grievance procedure with your insurance company. You can file online or print out a form and mail it to the office closest to you. The Department says that it will not accept faxes.

**Online Instructions for Filing a Complaint:** <http://insurance.mo.gov/consumer/complaints/index.htm>

**To File Your Complaint Online:** <http://insurance.mo.gov/consumer/complaints/eform.htm>

**Online Form to Print and Mail:** <http://insurance.mo.gov/consumer/complaints/complaint.txt>

**PDF Form to Print and Mail:** <http://insurance.mo.gov/consumer/complaints/complaint.pdf>

**Contact Information****Jefferson City**

Division of Consumer Affairs  
Missouri Department of Insurance  
PO Box 690  
301 West High Street, Room 630  
Jefferson City, MO 65102  
Phone: (573) 751-2640  
Toll-Free in MO: (800) 726-7390  
Email: [mdicons@mail.state.mo.us](mailto:mdicons@mail.state.mo.us)  
Web site: <http://insurance.mo.gov/>

**Kansas City**

Missouri Department of Insurance  
State Office Building, Room 512  
615 E. 13th Street  
Kansas City, MO 64106  
Phone: (816) 889-2381

**St. Louis**

Missouri Department of Insurance  
Wainwright Building, Suite 229  
111 N. 7th Street  
St. Louis, MO 63101  
Phone: (314) 340-6830

## NEVADA

**Contraceptive Coverage Requirement**

*Key Provisions.* An individual or group health insurer that offers or issues a policy of health insurance in Nevada providing coverage for prescription drugs or devices must cover FDA-approved prescription contraceptive drugs and devices. NEV. REV. STAT. ANN. § 689A.0415(1) (West 2006) (individual); NEV. REV. STAT. ANN. § 689B.0376(1) (West 2006) (group).

Insurers are prohibited from requiring a higher deductible, copayment, or coinsurance, or requiring longer waiting periods, for contraceptive drugs than for other prescription drugs. NEV. REV. STAT. ANN. § 689A.0415(2) (West 2006) (individual); NEV. REV. STAT. ANN. § 689B.0376(2) (West 2006) (group).

Nevada law also prohibits insurers from discouraging individuals from seeking contraceptive coverage. Specifically, the law prohibits insurers from excluding contraceptive users from coverage, penalizing health care providers for providing contraceptive coverage, or offering incentives not to accept or provide contraceptive coverage to individuals or health care providers. NEV. REV. STAT. ANN. § 689A.0415(2) (West 2006) (individual); NEV. REV. STAT. ANN. § 689B.0376(2) (West 2006) (group).

*Religious Refusal.* An insurer that is affiliated with a religious organization is not required to provide contraceptive coverage if the insurer objects on religious grounds. Before the issuance or renewal of a health insurance policy, such an insurer must provide to the prospective insured or the group policyholder written notice of the coverage that the insurer refuses to provide pursuant to the religious exception, and must provide such notice to each insured at the time he or she receives notice of coverage under the plan. NEV. REV. STAT. ANN. § 689A.0415(5) (West 2006) (individual); § 689B.0376(5) (West 2006) (group).

**Filing a Complaint**

You may file a complaint with the Division of Insurance of the Nevada Department of Business and Industry, but the Division recommends that you first contact the insurance company, agent, or broker and try to resolve the problem yourself. To submit a formal complaint to the Division, you can either print and mail the complaint form from the Division's website, or submit a form online.

Online Instructions for Filing a Complaint: <http://www.doi.state.nv.us/CS-CompIndex.htm>

Online Complaint Form: <https://doi.state.nv.us/CS-complaintnew.asp>

Complaint Form in PDF Version: <http://www.doi.state.nv.us/Form-CS-ComplaintFrm-9.pdf>

**Contact Information****Carson City**

Nevada Department of Business and Industry  
Division of Insurance  
788 Fairview Drive, Suite 300  
Carson City, NV 89701  
Phone: (775) 687-4270  
Toll-Free: (800) 992-0900 (ask for the Insurance Division)  
Email: [mrbnson@doi.state.nv.us](mailto:mrbnson@doi.state.nv.us)

Web site: <http://www.doi.state.nv.us>

**Las Vegas**

Nevada Department of Business and Industry  
Division of Insurance  
2501 E. Sahara Avenue  
Suite 302  
Las Vegas, NV 89104  
Phone: (702) 486-4009  
Toll-Free: (800) 992-0900 (ask for the Insurance Division)  
Email: [hamborn@doi.state.nv.us](mailto:hamborn@doi.state.nv.us)

## NEW HAMPSHIRE

**Contraceptive Coverage Requirement**

*Key Provisions.* Each insurer that issues or renews a group or blanket health insurance policy in New Hampshire covering prescription drugs must cover all FDA-approved prescription contraceptive drugs and devices under the same terms and conditions as it covers other prescription drugs. N.H. REV. STAT. ANN. § 415:18-i (West 2006) (insurer); N.H. REV. STAT. ANN. § 420-A:17-c (West 2006) (health service corporation); N.H. REV. STAT. ANN. § 420-B:8-gg (West 2006) (health maintenance organization). Each insurer that issues or renews a health group insurance policy covering outpatient services also must cover outpatient contraceptive services under the same terms and conditions as it covers other outpatient services. Outpatient contraceptive services are defined to mean outpatient consultations, examinations, and medical services related to the use of FDA-approved contraceptive methods to prevent pregnancy. N.H. REV. STAT. ANN. § 415:18-i (West 2006) (insurer); N.H. REV. STAT. ANN. § 420-A:17-c (West 2006) (health service corporation); N.H. REV. STAT. ANN. § 420-B:8-gg (West 2006) (health maintenance organization).

**Filing a Complaint**

You may file a complaint with the New Hampshire Insurance Department by printing and mailing a complaint form or by submitting the form online. When the Department receives your complaint, it forwards it to a representative of your insurance company for review, and the Department acts as an intermediary to help resolve problems between you and your insurance company.

Online Instructions for Filing a Complaint: [http://www.nh.gov/insurance/consumer\\_services/cons\\_complaints.htm](http://www.nh.gov/insurance/consumer_services/cons_complaints.htm)

Complaint Form in PDF version: [http://www.nh.gov/insurance/consumer\\_services/documents/complaintform.pdf](http://www.nh.gov/insurance/consumer_services/documents/complaintform.pdf)

Online Complaint Form: <http://www.naic.org/cis/fileComplaintForm.do?complaintState=NH>

**Contact Information**

New Hampshire Department of Insurance  
56 Old Suncook Road  
Concord, NH 03301-7317  
Phone: (603) 271-2261  
Toll-Free in NH: (800) 852-3416  
TDD/TTY Toll-Free in NH: (800) 735-2964  
Fax: (603) 271-0248  
Email: [requests@ins.state.nh.us](mailto:requests@ins.state.nh.us)  
Web site: <http://www.nh.gov/insurance/>

# NEW JERSEY

## **Contraceptive Coverage Requirement**

*Key Provisions.* Each hospital service corporation, medical service corporation, health service corporation, group health insurer, individual insurer, health maintenance organization, individual health benefits plan, small employer health benefits plan, or prepaid prescription service organization that provides hospital or medical expense benefits for expenses incurred in the purchase of outpatient prescription drugs under a contract delivered, issued, executed or renewed in New Jersey is required to provide coverage for expenses incurred in the purchase of any prescription contraceptive drug or device approved by the FDA. NJ STAT. ANN. § 17:48-6ee(1) (2006).

*Religious Refusal.* A religious employer (as defined in the statute) may request a policy without coverage for contraceptive methods if the coverage conflicts with the religious employer's bona fide religious beliefs and practices. If so requested, a policy must be provided without coverage for such contraceptive methods. A religious employer that obtains an exclusion shall provide written notice of the exclusion to subscribers and prospective subscribers. NJ STAT. ANN. § 17:48-6ee(1) (2006).

This exception may not apply to prescription drugs that are prescribed for reasons other than contraceptive purposes or for prescription contraceptives that are necessary to preserve the life or health of the subscriber. NJ STAT. ANN. § 17:48-6ee(1) (2006).

## **Filing a Complaint**

You may file a Consumer Complaint with the New Jersey Department of Banking and Insurance, either by filling out a form online or printing the form from the Department's website and sending it to the Department. All complaints need to include the company name/agent's name, the policy/certificate number(s), any documentation that will substantiate your position, and a brief description of the problems.

Online Complaint Form: [https://www6.state.nj.us/DOBI\\_UIC/UICPublicEntryServlet](https://www6.state.nj.us/DOBI_UIC/UICPublicEntryServlet)

Complaint Form in PDF version: <http://www.state.nj.us/dobi/complain.pdf>

## **Contact Information**

New Jersey Division of Insurance  
20 West State Street  
P.O. Box 329  
Trenton, N.J. 08625-0329  
Phone: (800) 838-0935  
Fax: (609) 777-0508  
Web site: <http://www.state.nj.us/dobi/>

## NEW MEXICO

**Contraceptive Coverage Requirement**

*Key Provisions.* Each individual and group health insurance policy, health care plan, certificate of health insurance, and health maintenance contract delivered or issued for delivery in New Mexico that offers a prescription drug benefit must offer coverage for FDA-approved prescription contraceptive drugs or devices. N.M. STAT. ANN. § 59A-22-42 (West 2006) (health insurance policy, plan, or certificate); N.M. STAT. ANN. § 59A-46-44 (West 2006) (health maintenance organization contract).

Insurers must provide prescription contraceptive drugs and devices at the same level of deductible or coinsurance as any other covered benefit. N.M. STAT. ANN. § 59A-22-42 (West 2006) (health insurance policy, plan, or certificate); N.M. STAT. ANN. § 59A-46-44 (West 2006) (health maintenance organization contract).

*Religious Refusal.* A religious entity may elect to exclude prescription contraceptive drugs or devices from the health coverage it purchases. N.M. STAT. ANN. § 59A-22-42 (West 2006) (health insurance policy, plan, or certificate); N.M. STAT. ANN. § 59A-46-44 (West 2006) (health maintenance organization contract).

**Filing a Complaint**

Before filing a complaint, the New Mexico Insurance Bureau suggests that you contact your insurance provider and try to resolve the problem. If you are unable to obtain contraceptive coverage, you may file a complaint with the Consumer Relations Division of the Insurance Bureau. You should print out the complaint form and either mail or fax it to the Division, along with copies of all relevant documents. The Division will assist you and act as a liaison between you and your insurance company.

Online Complaint Form: <http://www.nmprc.state.nm.us/consumers/pdf/insurancecomplaint.pdf>

**Contact Information**

Consumer Relations Division  
Insurance Bureau  
New Mexico Public Regulation Commission  
P.O. Box 1269  
Santa Fe, NM 87504-1269  
Phone: (505) 827-4592  
Toll-Free in NM: (800) 663-9782  
Fax: (505) 827-4734  
Web site: <http://www.nmprc.state.nm.us/insurance/inshm.htm>

## NEW YORK

**Contraceptive Coverage Requirement**

*Key Provisions.* Every group or blanket policy issued in New York that provides coverage for prescription drugs must include coverage for the cost of FDA-approved prescription contraceptive drugs or devices, or their generic equivalents. N.Y. INS. § 3221(l)(16) (West 2006).

Contraceptive coverage must be included in policies and certificates through the addition of a rider. Such coverage may be subject to reasonable deductibles and coinsurance consistent with deductibles and coinsurance for other drugs or devices covered under the policy. N.Y. INS. § 3221(l)(16) (West 2006); N.Y. INS. § 3221(l)(16)(d) (West 2006).

*Religious Refusal.* A religious employer (as defined in the law) may request a contract without coverage for contraceptive methods that are contrary to that employer's religious tenets. If so requested, a contract must be provided without coverage for such contraceptive methods. However, enrollees may not be denied coverage of, and timely access to, contraceptive methods. A religious employer that invokes this exemption must provide a prospective enrollee written notice, prior to a prospective enrollee's enrollment with the plan, listing the contraceptive health care services the employer refuses to cover for religious reasons. An individual has the right to directly purchase a contraceptive coverage rider from the insurer, at the prevailing small group community rate, if his or her employer claims the religious exemption. N.Y. INS. § 3221(l)(16)(A)-(B) (West 2006).

The religious exception does not permit the exclusion of coverage for contraceptive drugs prescribed for reasons other than contraceptive purposes. N.Y. INS. § 3221(l)(16)(C) (West 2006).

**Filing a Complaint**

You may file a complaint with the New York Insurance Department at any time, regardless of the status of your efforts to resolve the matter with your insurance company. The Department recommends filing your complaint online, as you will receive an immediate confirmation. If you have copies of documents relevant to your case that should be included with your complaint, you should print out a form and mail or fax it to the Department with the documents.

Online Instructions for Filing a Complaint: <http://www.ins.state.ny.us/complhow.htm>

Online Complaint Form: <https://awebproxyprd.ins.state.ny.us/onepage/?rid=221>

Complaint Form in PDF Version: <http://www.ins.state.ny.us/acrobat/compl.pdf>

**Contact Information****Albany**

Consumer Services Bureau  
New York State Insurance Department  
One Commerce Plaza  
Albany, NY 12257  
Phone: (800) 342-3736

Web site: <http://www.ins.state.ny.us>

**New York City**

Consumer Services Bureau  
New York State Insurance Department  
25 Beaver St  
New York, NY 10004  
Phone: (212) 480-6400  
Fax: (212) 480-4735

# NORTH CAROLINA

## **Contraceptive Coverage Requirement**

*Key Provisions.* Every insurer providing an individual or group health benefit plan in North Carolina that provides coverage for prescription drugs and devices must provide coverage for FDA-approved prescription contraceptive drugs or devices. Coverage must include coverage for the insertion and removal of, and any medically necessary examination associated with, the use of the prescribed contraceptive drug or device. Every insurer providing a health benefit plan that provides coverage for outpatient services provided by a health care professional must provide coverage for outpatient contraceptive services. N.C. GEN. STAT. ANN. § 58-3-178(a)-(b) (West 2006); N.C. GEN. STAT. ANN. § 58-3-178(c)(1) (West 2006) (health benefit plan).

Contraceptives and contraceptive outpatient services may be provided subject to the same deductibles, coinsurance, or other limitations as those that apply to other prescription drugs or outpatient services. A health benefit plan may require that the total coinsurance, based on the useful life of the drug or device, be paid in advance for those drugs or devices that are inserted or prescribed and do not have to be refilled on a periodic basis. N.C. GEN. STAT. ANN. § 58-3-178(a)-(b) (West 2006).

*Religious Refusal.* A religious employer (as defined in the law) may request that an insurer provide a health benefit plan that excludes coverage for prescription contraceptive drugs or devices that are contrary to the employer's religious tenets, and upon request, the insurer must provide such a plan. An insurer providing such a plan must provide written notice to each person covered under the plan that prescription contraceptive drugs or devices are excluded from coverage at the employer's request. N.C. GEN. STAT. ANN. § 58-3-178(e) (West 2006).

The religious exception does not permit the exclusion of coverage for contraceptive drugs prescribed for reasons other than contraceptive purposes, or for prescription contraception that is necessary to preserve the life or health of a person covered under the plan. N.C. GEN. STAT. ANN. § 58-3-178(e) (West 2006).

## **Filing a Complaint**

You may file a complaint with the North Carolina Department of Insurance. You do not need to exhaust the internal appeal process with your health insurance plan before making a complaint. You can either print and mail a complaint form, or, if you are not submitting copies of relevant documents, you can submit your complaint online.

Online Complaint Form: <http://www.ncdoi.com/Consumer/InsuranceInfo/Complaint.asp>

## **Contact Information**

North Carolina Department of Insurance  
430 North Salisbury St.  
P.O. Box 26387  
Raleigh, NC 27611  
Phone: (919) 733-2032  
Toll-Free: (800) 546-5664  
Fax: (919) 733-6495  
Email: [bstevens@ncdoi.net](mailto:bstevens@ncdoi.net)  
Web site: <http://www.ncdoi.com>



## OREGON

\*This law becomes effective on January 1, 2008.

**Contraceptive Coverage Requirement**

*Key Provisions.* Each prescription drug benefit program or prescription drug benefit offered under a health benefit plan or under a student health insurance policy must provide payment, coverage or reimbursement for FDA-approved prescription contraceptives and, if covered for other drug benefits under the program, plan or policy, must provide outpatient consultations, examinations, procedures and medical services necessary to prescribe, dispense, deliver, distribute, administer or remove a prescription contraceptive. H.B. 2700, 74th Leg., 2007 Reg. Sess. (Or. 2007).

*Religious Refusal.* A religious employer (defined in the statute) is exempt from the requirements of this law with respect to a prescription drug benefit program or a health benefit plan it provides to its employees. H.B. 2700, 74th Leg., 2007 Reg. Sess. (Or. 2007).

**Filing a Complaint**

Before filing a complaint, the Insurance Division of the Department of Consumer and Business Services suggests that you contact your insurance company or agent to try and resolve the problem. If you are unable to obtain contraceptive coverage, you may file a complaint. You can file a complaint by email, letter, in person, on-line or possibly by phone. The Division's Consumer Advocacy Unit assists consumers with complaints.

Online Complaint Form: <https://www4.cbs.state.or.us/exs/ins/complaint/>

Complaint Form in PDF Version: <http://www.cbs.state.or.us/ins/forms/consumer/comp.pdf>

**Contact Information**

Oregon Insurance Division—Consumer Advocacy Unit  
350 Winter St., NE, Room 440  
P.O. Box 14480  
Salem, OR 97309-0405  
Phone: (503) 947-7984  
Toll free: (888) 877-4894  
E-mail: [ins.cp@state.or.us](mailto:ins.cp@state.or.us)  
Website: [insurance.oregon.gov](http://insurance.oregon.gov)

## RHODE ISLAND

**Contraceptive Coverage Requirement**

*Key Provisions.* Every individual or group health insurance contract, plan, or policy that provides prescription coverage and is delivered, issued for delivery, or renewed in Rhode Island must provide coverage for FDA-approved prescription contraceptive drugs and devices. Coverage for the prescription drug RU 486 is not required. R.I. GEN. LAWS § 27-19-48(a) (West 2006) (hospital service corporation); R.I. GEN. LAWS § 27-18-57(a) (West 2006) (insurance company); R.I. GEN. LAWS § 27-20-43(a) (West 2006) (medical service corporation); R.I. GEN. LAWS § 27-41-59(a) (West 2006) (health maintenance corporation).

*Religious Refusal.* Any insurer may issue to a religious employer (as defined in the law) an individual or group health insurance contract, plan, or policy that excludes coverage for prescription contraceptive methods that are contrary to the religious employer's bona fide religious tenets. Every employer that invokes the religious exemption must provide prospective enrollees, prior to enrollment with the plan, written notice listing the contraceptive health care services the employer refuses to cover for religious reasons. R.I. GEN. LAWS § 27-19-48(b) (West 2006); R.I. GEN. LAWS § 27-19-48(d) (West 2006) (hospital service corporation); R.I. GEN. LAWS § 27-18-57(b) (West 2006); R.I. GEN. LAWS § 27-18-57(d) (West 2006) (insurance company); R.I. GEN. LAWS § 27-20-43(b) (West 2006); R.I. GEN. LAWS § 27-20-43(d) (West 2006) (medical service corporation); R.I. GEN. LAWS § 27-41-59(b) (West 2006); R.I. GEN. LAWS § 27-41-59(d) (West 2006) (health maintenance corporation).

**Filing a Complaint**

You may file a complaint with the Insurance Division of the Department of Business Regulation. The form can be printed and mailed to the address below.

Complaint Form in PDF Version: [http://www.dbr.state.ri.us/pdf\\_forms/insur/complaint\\_form.PDF](http://www.dbr.state.ri.us/pdf_forms/insur/complaint_form.PDF)

**Contact Information**

Rhode Island Department of Business Regulation  
Insurance Division  
233 Richmond St., Suite 233  
Providence, RI 02903-4233  
Phone: (401) 222-2223  
Fax: (401) 222-5475  
Website: <http://www.dbr.state.ri.us/insurance.html>  
Email: [InsuranceInquiry@dbr.state.ri.us](mailto:InsuranceInquiry@dbr.state.ri.us)

## VERMONT

**Contraceptive Coverage Requirement**

*Key Provisions.* Any individual or group health insurance plan issued in Vermont must provide coverage for outpatient contraceptive services, including sterilizations, and must provide coverage for all FDA-approved prescription contraceptive drugs and devices if the plan provides coverage for other prescription drugs. VT. STAT. ANN. tit. 8, § 4099c(a)-(b) (West 2006).

An insurer may not establish any rate, term, or condition that places a greater financial burden on an insured or beneficiary for access to contraceptive services or prescription contraceptive drugs and devices than for access to treatment, prescriptions or devices for any other health condition. VT. STAT. ANN. tit. 8, § 4099c(a) (West 2006).

**Filing a Complaint**

Before filing a complaint, the Vermont Insurance Division of the Department of Banking, Insurance, Securities and Health Care Administration suggests calling its Consumer Help Line to discuss your case. If you are not able to resolve the problem after speaking with the Insurance Division, you may file a complaint. You can call the Division and request that a complaint form be sent to you, or go online and download and print the form.

Complaint Form in PDF Version: [http://www.bishca.state.vt.us/InsurDiv/Consumer/ComplaintForm\\_Jan02.pdf](http://www.bishca.state.vt.us/InsurDiv/Consumer/ComplaintForm_Jan02.pdf)

Complaint Form in Word Version: [http://www.bishca.state.vt.us/InsurDiv/Consumer/ComplaintForm\\_web\\_Jan02.doc](http://www.bishca.state.vt.us/InsurDiv/Consumer/ComplaintForm_web_Jan02.doc)

**Contact Information**

Insurance Division—Consumer Assistance  
Vermont Department of Banking, Insurance, Securities and Health Care Administration  
89 Main St. Drawer 20  
Montpelier, VT 05620-3101  
Phone: (802) 828-3302  
Toll free in VT: (800) 631-7788  
Consumer Help Line: (800) 964-1784  
Fax: (802) 828-3301  
Web site: <http://www.bishca.state.vt.us>

## WASHINGTON

**Contraceptive Coverage Requirement**

*Key Provisions.* An administrative rule issued by the state Insurance Commissioner on September 5, 2001 mandates contraceptive coverage in Washington State. The rule declares that it is an unfair practice, and therefore unlawful under state law, for any health carrier doing business in the state to restrict, exclude or reduce coverage or benefits under any individual or group health plan on the basis of sex. WASH. ADMIN. CODE 284-43-822(1) (West 2006); WASH. ADMIN. CODE § 284-43-130(15) (West 2006) (health plan). It further provides that a health plan providing generally comprehensive coverage of prescription drugs and devices is committing sex discrimination in violation of this provision if it fails to cover prescription contraceptives as set forth below. The rule states that a plan provides generally comprehensive coverage of prescription drugs if it covers prescription drugs even if it excludes some categories such as weight reduction or smoking cessation. WASH. ADMIN. CODE § 284-43-822(1) (West 2006).

Under this rule, a plan that provides generally comprehensive coverage of prescription drugs or devices may not exclude prescription contraceptives or cover prescription contraceptives on a less favorable basis than other covered prescription drugs and devices. WASH. ADMIN. CODE § 284-43-822(2)(a) (West 2006). Prescription contraceptives include all FDA-approved contraceptive drugs and devices. WASH. ADMIN. CODE § 284-43-822(2)(f) (West 2006). Health plans may not impose benefit waiting periods, limitations or restrictions on prescription contraceptives that are not required or imposed on other covered prescription drugs or devices. WASH. ADMIN. CODE § 284-43-822(2)(b) (West 2006). A plan may require cost sharing, such as copayments or deductibles, for prescription contraceptives or associated services, only to the same extent that such cost sharing is required for other covered prescription drugs, devices or services. WASH. ADMIN. CODE § 284-43-822(2)(c) (West 2006). Coverage may be limited to a drug formulary if such a formulary is used for other prescription drugs, as long as all FDA-approved methods of contraception are covered. WASH. ADMIN. CODE § 284-43-822(2)(d) (West 2006).

*Religious Refusal.* The administrative rule does not contain any religious refusal clause. Washington state law does contain a provision that permits an employer with a religious or moral tenet opposed to a specific health care service to choose not to purchase insurance coverage for that service if it objects to doing so for reason of conscience or religion, so long as an enrollee is not denied coverage of such service. WASH. REV. CODE ANN. § 48.43.065 (West 2006); WASH. ADMIN. CODE § 284-43-800 (West 2006). But the state Attorney General has determined that, in light of the contraceptive coverage rule, this provision does not permit an employer to decline contraceptive coverage for reasons of conscience or religion, noting that while an employer may not be compelled to purchase for its employees coverage to which it has a conscientious objection, it must find a way to cover the costs of contraceptive coverage for its employees. WASH. A.G.O. 2002 No. 5 (Aug. 8, 2002).

**Filing a Complaint**

You may file a complaint with the Washington State Office of the Insurance Commissioner. The Office suggests that you pursue all avenues available with your insurance company to address the problem, even if you file a complaint.

You can file a complaint electronically on the Office's website. If you need to sign a release of medical information, or if you wish to send supporting documents, you can print out the complaint form and mail it to the Office. The Office estimates that it will take approximately 30 days to resolve the matter.

Online Complaint Form: <https://fortress.wa.gov/oic/oicforms/LDHEmailform.aspx>

Complaint Form in PDF Version: [http://www.insurance.wa.gov/publications/complaint/Complaint\\_LifeAndHealth.pdf](http://www.insurance.wa.gov/publications/complaint/Complaint_LifeAndHealth.pdf)

**Contact Information**

Washington State  
Office of the Insurance Commissioner  
14th Ave. and Water St.  
P.O. Box 40256  
Olympia, WA 98504-0256  
Phone: (360) 725-7080  
Toll-Free in WA: (800) 562-6900  
TDD: (360) 664-3154  
Fax: (360) 586-2018  
Email: [inscomr@aol.com](mailto:inscomr@aol.com)  
Web site: <http://www.insurance.wa.gov>

## WEST VIRGINIA

**Contraceptive Coverage Requirement**

*Key Provisions.* Individual or group health insurance plans that provide benefits for prescription drugs or devices in prescriptive drug plans may not exclude or restrict benefits to covered persons, not including dependent children, for any prescription contraceptive drug or device approved by the FDA. Also, any health insurance plan that provides benefits for prescription drugs or devices in a prescription drug plan and that provides benefits for outpatient services provided by a health care professional may not exclude or restrict outpatient contraceptive services for covered persons for prescription contraceptives or devices. W. VA. CODE ANN. § 33-16E-4(a)-(b) (West 2006); W. VA. CODE ANN. § 33-16E-3 (West 2006); W. VA. CODE ANN. § 33-16E-2(3) (West 2006) (health insurance plan); W. VA. CODE ANN. § 33-16E-2(2) (West 2006) (covered persons).

A health insurance plan may not impose deductibles, copayments, other cost-sharing mechanisms, or waiting periods for prescription contraceptive drugs or devices greater than those for other covered prescription drugs or devices or other covered outpatient services. W. VA. CODE ANN. § 33-16E-5(1)-(2) (West 2006). Additionally, a health insurance plan may not deny eligibility, enrollment or renewal to any individual because of her use or potential use of contraceptives or provide monetary payments or rebates to covered persons to encourage them to accept less than minimum protections available under this section. W. VA. CODE ANN. § 33-16E-6(1)-(2) (West 2006).

*Religious Refusal.* A religious employer (as defined in the statute) may exclude or restrict from any health-care insurance plan contract benefits for any prescription contraceptive drugs and devices that are contrary to the religious employer's religious tenets. This does not exclude coverage for prescription contraceptive supplies prescribed for reasons other than contraceptive purposes. The health insurer invoking this exemption must provide written notice to prospective enrollees listing the services that the employer refuses to cover and make available for purchase a rider that provides prescription contraceptive drugs and devices. W. VA. CODE ANN. § 33-16E-7(a)-(c) (West 2006); W. VA. CODE ANN. § 33-16E-2(5) (West 2006) (religious employer).

**Filing a Complaint**

In order to file a complaint, you should fill out the on-line Complaint Form and submit it to the West Virginia Insurance Commission. If internet access is not possible then you can call the office at the contact number below for a copy of the form. On the Complaint Form you should include: the complainant's name, address, and telephone number, name of insured person, claimant's name (if different from the insured), insurance company and/or agent, type of coverage, policy number, claim number, date of loss, and an explanation of the reason for the complaint.

Online complaint form: [http://www.wvinsurance.gov/forms/consumer/con\\_complaint\\_form.pdf](http://www.wvinsurance.gov/forms/consumer/con_complaint_form.pdf)

**Contact Information****Correspondence**

Office of the Insurance Commissioner  
ATTN: Consumer Service Division  
P.O. Box 50540  
Charleston, WV 25305-0540

**Physical address**

Consumer Services Division  
1124 Smith St., Room 309  
Charleston, WV 25301  
Phone: (304)558-3386  
Toll Free: 1-888-TRY WVIC (888-879-9842)  
TTY: 1-800-435-7381  
Fax: (304)558-4965  
Web site: <http://www.wvinsurance.gov/>  
E-mail: [consumer.service@wvinsurance.gov](mailto:consumer.service@wvinsurance.gov)

State	TEXT OF RELIGIOUS EXEMPTION	WHAT EMPLOYEES CAN EXPECT
Arizona	<p>A.R.S. § 20-1057.08(G)                      “Religious employer” means an entity for which all of the following apply:</p> <ol style="list-style-type: none"> <li>1) The entity primarily employs persons who share the religious tenets of the entity.</li> <li>2) The entity serves primarily persons who share the religious tenets of the entity.</li> <li>3) The entity is a nonprofit organization as described in § 6033(a)(2)(a)(i) or (iii) of the Internal Revenue Code of 1986, as amended.</li> </ol> <p>NOTE: This narrow religious exemption (similar to CA &amp; NY) appears to be unchallenged in court thus far.</p>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches and associations of churches</li> </ul> <p>Religious employers that would have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Church-affiliated schools</li> <li>• Religious charities</li> <li>• Religious hospitals</li> </ul>
Arkansas	<p>A.C.A. § 23-79-1102(3)                      “Religious employer” means an entity that:</p> <ol style="list-style-type: none"> <li>a) Is organized and operated for religious purposes and has received a § 501(c)(3) designation from the IRS;</li> <li>b) Has as one (1) of its primary purposes the inculcation<sup>1</sup> of religious values; and</li> <li>c) Employs primarily persons who share its religious tenets</li> </ol>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches</li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Church-affiliated schools (exempt from the mandate only if the school primarily employs persons who share its religious tenets, and if one of the primary purposes is the inculcation of religious values).</li> <li>• Nonprofit religious charities (exempt from the mandate only if the charity primarily employs persons who share its religious tenets, and if one of the primary purposes is the inculcation of religious values.)</li> <li>• Nonprofit religious hospitals (hospitals are unlikely to “primarily” employ persons who share their religious tenets, and their purpose is not to inculcate religious values to their patients.)</li> </ul>
California	<p>West’s Ann. Cal. Ins. Code § 10123.196(d)(1)                      “Religious employer” is an entity for which each of the following is true:</p> <ol style="list-style-type: none"> <li>a) The inculcation of religious values is the purpose of the entity.</li> <li>b) The entity primarily employs persons who share the religious tenets of the entity.</li> <li>c) The entity serves primarily persons who share the religious tenets of the entity.</li> <li>d) The entity is a nonprofit organization pursuant to § 6033(a)(2)(A)(i) or (iii) of the Internal Revenue Code of 1986, as amended.</li> </ol> <p>NOTE: § 6033(a)(2)(A)(i) includes only “churches, their integrated auxiliaries, and conventions or associations of churches” and (iii) only extends to “the exclusively religious activities of any religious order.”</p> <p>NOTE: This narrow religious exception was upheld in <i>Catholic Charities of Sacramento, Inc. v. Superior Court</i>, 85 P.3d 67 (Cal. 2004), cert. denied, 543 U.S. 16 (2004).</p>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches and associations of churches</li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Church-affiliated schools</li> <li>• Religious charities</li> <li>• Religious hospitals</li> </ul>
Connecticut	<p>C.G.S.A. § 38a-503e(f)                      “Religious employer” means an employer that is a “qualified church-controlled organization as defined in 26 U.S. Code § 3121 or a church-affiliated organization.</p> <p>NOTE: 26 U.S.C. § 3121(w)(3) includes:</p> <ol style="list-style-type: none"> <li>a) “...a church, a convention or association of churches, or an elementary or secondary school which is controlled, operated, or principally supported by a church or by a convention or association of churches;</li> <li>b) “...[a] church-controlled tax exempt organization described in § 501(c)(3), other than an organization which                         <ol style="list-style-type: none"> <li>i. offers goods, services, or facilities for sale, other than on an incidental basis, to the general public, other than goods, services, or facilities which are sold at a nominal charge which is substantially less than the cost of providing such goods, services, or facilities and,</li> <li>ii. normally receives more than 25% of its support from either I) governmental sources, or II) receipts from admissions, sales of merchandise, performance of services, or furnishing of facilities, in activities which are not unrelated to trades or businesses, or both.</li> </ol> </li> </ol>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches</li> <li>• Church-affiliated <i>elementary or high schools</i></li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Nonprofit church-affiliated colleges (unless less than 25% of the college’s budget comes from government sources)</li> <li>• Nonprofit religious charities (unless less than 25% of the organization’s budget comes from government sources)</li> <li>• Religious hospitals (assuming more than 25% of their budget comes from government sources or patient revenue [“performance of services”])</li> </ul>

<sup>1</sup> Definition of “inculcate”: to implant by repeated statement or admonition; teach persistently and earnestly; to cause or influence (someone) to accept an idea or feeling. (Random House Unabridged Dictionary, 2006).

State	TEXT OF RELIGIOUS EXEMPTION	WHAT EMPLOYEES CAN EXPECT
Delaware	<p>18 Del. C. § 3559(d)                      A religious employer may request and an entity subject to this section shall grant an exclusion from coverage... if the required coverage conflicts with the religious organization’s bona fide religious beliefs and practices.                      NOTE: DE does not provide a definition of the term “religious employer” or “religious organization” elsewhere in the section or in any other statute.                      NOTE: As with MD (whose statute is similarly worded), the discretion to grant or withhold an exclusion from coverage is delegated by the statute to individual insurance companies. It is unclear how many DE insurance companies have had such exclusions requested, whether DE insurance companies have internal guidelines to determine whether such a request should be granted, and how much variance there is among DE insurance company guidelines.</p>	<p>Unclear</p>
Hawaii	<p>HI Rev. Stat. § 431:10A-116.7(a)                      A “religious employer” is an entity for which each of the following is true:                      1) The inculcation of religious values is the purpose of the entity;                      2) The entity primarily employs persons who share the religious tenets of the entity;                      3) The entity is not staffed by public employees;                      4) The entity is a nonprofit organization as defined under § 501(c)(3) of the Internal Revenue Code of 1986, as amended.                      For the purpose of this definition, any educational, health care, or other non-profit institution or organization owned or controlled by the employer is included in this exemption.</p>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches</li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Church-affiliated schools</li> <li>• Religious charities</li> <li>• Religious hospitals</li> </ul> <p><i>(Mere affiliates of religious employers are not included in HI’s definition – only those institutions that, although they may not meet HI’s definition individually, are either owned or controlled by an employer meeting the definition. Religious schools, charities and hospitals are affiliated with religious institutions — but not usually directly owned/controlled by a church – and are therefore not part of the exclusion.)</i></p>
Maine	<p>24 M.R.S.A. § 2332-J(2)                      “Religious employer” means an employer that is a church, convention or association of churches or an elementary or secondary school that is controlled, operated or principally supported by a church or by a convention or association of churches as defined in 26 U.S. Code § 3121(w)(3)(A) and that qualifies as a tax-exempt organization under 26 U.S. Code § 501(c)(3).                      NOTE: 26 U.S.C. § 3121(w)(3)(A) includes:                      “...a church, a convention or association of churches, or an elementary or secondary school which is controlled, operated, or principally supported by a church or by a convention or association of churches. <i>(Unlike CT and MA, ME only references 26 U.S.C. § 3121(w)(3)(A), and excludes § 3121(w)(3)(B) – the section dealing with “qualified church-controlled organizations.”)</i></p>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches</li> <li>• Church-affiliated <i>elementary or high schools</i></li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Religious hospitals</li> <li>• Church-affiliated colleges</li> <li>• Religious charities</li> </ul>
Maryland	<p>MD Code, Insurance, § 15-826(c)                      A religious organization may request and an entity subject to this section shall grant the request for an exclusion from coverage under the policy, plan, or contract for the coverage under subsection (b) of this section if the required coverage conflicts with the religious organization’s bona fide religious beliefs and practices.                      NOTE: “Religious organization” is not further defined elsewhere in the section or in any other statute.                      NOTE: As with DE (whose statute is similarly worded), the discretion to grant or withhold an exclusion from coverage is delegated by the statute to individual insurance companies. It is unclear how many MD insurance companies have had such exclusions requested, whether MD insurance companies have internal guidelines to determine whether such a request should be granted, and how much variance there is among MD insurance company guidelines.</p>	<p>Unclear</p>

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Massachusetts	<p>M.G.L.A. 175 § 47W(c)                      This section shall not apply to an individual policy of accident and sickness insurance delivered, issued or renewed pursuant to § 108 or any group blanket policy of accident and sickness insurance delivered, issued or renewed pursuant to § 110 if that policy is purchased by an employer that is a church or qualified church-controlled organization, as those terms are defined in 26 U.S. Code § 3121(w)(3)(A) and (B).                      NOTE: 26 U.S.C. § 3121(w)(3) includes:</p> <ul style="list-style-type: none"> <li>a) "...a church, a convention or association of churches, or an elementary or secondary school which is controlled, operated, or principally supported by a church or by a convention or association of churches;</li> <li>b) "...[a] church-controlled tax exempt organization described in § 501(c)(3), other than an organization which                             <ul style="list-style-type: none"> <li>i. offers goods, services, or facilities for sale, other than on an incidental basis, to the general public, other than goods, services, or facilities which are sold at a nominal charge which is substantially less than the cost of providing such goods, services, or facilities and,</li> <li>ii. normally receives more than 25% of its support from either I) governmental sources, or II) receipts from admissions, sales of merchandise, performance of services, or furnishing of facilities, in activities which are not unrelated to trades or businesses, or both.</li> </ul> </li> </ul>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches</li> <li>• Church-affiliated <i>elementary or high schools</i></li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Nonprofit church-affiliated colleges (<i>unless less than 25%</i> of the college's budget comes from government sources)</li> <li>• Nonprofit religious charities (<i>unless less than 25%</i> of the organization's budget comes from government sources)</li> <li>• Religious hospitals (assuming <i>more than 25%</i> of their budget comes from government sources or patient revenue ["performance of services"])</li> </ul>
Missouri	<p>V.A.M.S. 376.1199(4)                      (1) Any health carrier may issue to any person or entity purchasing a health benefit plan, a health benefit plan that excludes coverage for contraceptives if the use or provision of such contraceptives is contrary to the moral, ethical or religious beliefs or tenets of such person or entity;                      ...                      (3) Any health carrier which is owned, operated or controlled in substantial part by an entity that is operated pursuant to moral, ethical or religious tenets that are contrary to the use or provision of contraceptives shall be exempt from the provisions of 1(4) of this section [requiring contraceptive coverage]. [According to V.A.M.S. 376.1199(2), for the purposes of the religious exemption the term "health carrier" has the meaning provided in V.A.M.S. 376.1350(22).]</p> <p>V.A.M.S. 376.1350(22)                      "Health carrier," an entity subject to the insurance laws and regulations of this state that contracts or offers to contract to provide, deliver, arrange for, pay for or reimburse any of the costs of health care services, including a sickness and accident insurance company, a health maintenance organization, a nonprofit hospital and health service corporation, or any other entity providing a plan of health insurance, health benefits or health services; except that such plan shall not include any coverage pursuant to a liability insurance policy, workers' compensation insurance policy, or medical payments insurance issued as a supplement to a liability policy.</p>	<p>Unclear</p>
Nevada	<p>N.R.S. 689A.0415(5) / N.R.S. 689B.0377(5)                      Any insurer which offers or issues a policy of health insurance and which is affiliated with a religious organization is not required to provide the coverage... if the insurer objects on religious grounds.                      NOTE: N.R.S. 679A.100 defines "insurer" as "includ[ing] every person engaged as principal and as indemnitor, surety or contractor in the business of entering into contracts of insurance."                      NOTE: The section does not define "religious organization."</p>	<p>This policy only extends to religious insurance companies – not religious employers. This means that employees of secular organizations whose health insurance is provided through a religious insurer that objects to contraceptive coverage will not have contraceptive coverage, but employees of a religious organization (whether church, religiously-affiliated school, charity or hospital) whose health insurance was administered by a non-religiously affiliated plan would have to be provided contraceptive coverage.</p>



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New Jersey	<p>N.J.S.A. 17:48ee                      “Religious employer” means an employer that is a church, convention or association of churches or an elementary school or secondary school that is controlled, operated or principally supported by a church or by a convention or association of churches as defined in 26 U.S.C. § 3121(w)(3)(A), and that qualifies as a tax-exempt organization under 26 U.S.C. § 501(c)(3).                      NOTE: 26 U.S.C. § 3121(w)(3)(A) includes:                      “...a church, a convention or association of churches, or an elementary or secondary school which is controlled, operated, or principally supported by a church or by a convention or association of churches. (<i>Unlike CT and MA, NJ only references 26 U.S.C. § 3121(w)(3)(A), and excludes § 3121(w)(3)(B) – the section dealing with “qualified church-controlled organizations.”</i>)</p>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches</li> <li>• Church-affiliated <i>elementary or high schools</i></li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Religious hospitals</li> <li>• Church-affiliated colleges</li> <li>• Religious charities</li> </ul>
New Mexico	<p>N.M.S.A. § 59A-22-42; N.M.S.A. § 59A-46-44                      NM states that “a religious entity purchasing individual or group health insurance coverage may elect to exclude prescription contraceptive drugs or devices from the health coverage purchased.” The statute does not define “religious entity” any further, nor is the term “religious entity” a term of art that is defined anywhere else in NM’s statutes.                      NOTE: “Religious entity” is not defined anywhere in NM statutes.</p>	<p>Unclear</p>
New York	<p>McKinney’s Insurance Law § 3221(16)(A)(1)                      A religious employer is an entity for which each of the following is true:                      a) the inculcation of religious values is the purpose of the entity                      b) the entity primarily employs persons who share the religious tenets of the entity                      c) the entity services primarily persons who share the religious tenets of the entity                      d) the entity is a nonprofit organization as described in § 6033(a)(2)(A)(i) or (iii), of the Internal Revenue Code of 1986. (See CA)                      NOTE: This narrow religious exception was upheld in <i>Catholic Charities of the Diocese of Albany v. Serio</i>, 2006 NY Slip. Op. 07517 (N.Y., Oct. 19, 2006).</p>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches and associations of churches</li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Church-affiliated schools</li> <li>• Religious charities</li> <li>• Religious hospitals</li> </ul>
North Carolina	<p>N.C.G.S.A. § 58-3-178(e)                      The term “religious employer” means an entity for which all of the following are true:                      1) The entity is organized and operated for religious purposes and is tax exempt under § 501(c)(3) of the US Internal Revenue Code                      2) The inculcation of religious values is one of the primary purposes of the entity                      3) The entity employs primarily persons who share the religious tenets of the entity.</p>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches</li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Church-affiliated schools (exempt from the mandate <i>only if</i> the school primarily employs persons who share its religious tenets, and if one of the primary purposes is the inculcation of religious values).</li> <li>• Nonprofit religious charities (exempt from the mandate <i>only if</i> the charity primarily employs persons who share its religious tenets, and if one of the primary purposes is the inculcation of religious values.)</li> <li>• Nonprofit religious hospitals (hospitals are unlikely to “primarily” employ persons who share their religious tenets, and their purpose is not to inculcate religious values to their patients.)</li> </ul>

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Oregon	<p>A “religious employer” is an employer:</p> <ul style="list-style-type: none"> <li>a) Whose purpose is the inculcation of religious values;</li> <li>b) That primarily employs persons who share the religious tenets of the employer;</li> <li>c) That primarily serves persons who share the religious tenets of the employer; and</li> <li>d) That is a nonprofit organization under section 6033(a)(2)(A)(i) or (iii) of the Internal Revenue Code.</li> </ul>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches</li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Church-affiliated schools</li> <li>• Religious charities</li> <li>• Religious hospitals</li> </ul>
Rhode Island	<p>R.I.St. § 27-19-48(c) As used in this section, “religious employer” means an employer that is a “church or a qualified church-controlled organization” as defined in 26 U.S.C. § 3121. NOTE: 26 U.S.C. § 3121(w)(3) includes:</p> <ul style="list-style-type: none"> <li>a) “...a church, a convention or association of churches, or an elementary or secondary school which is controlled, operated, or principally supported by a church or by a convention or association of churches;</li> <li>b) “[a] church-controlled tax exempt organization described in § 501(c)(3), other than an organization which             <ul style="list-style-type: none"> <li>i. offers goods, services, or facilities for sale, other than on an incidental basis, to the general public, other than goods, services, or facilities which are sold at a nominal charge which is substantially less than the cost of providing such goods, services, or facilities and,</li> <li>ii. normally receives more than 25% of its support from either I) governmental sources, or II) receipts from admissions, sales of merchandise, performance of services, or furnishing of facilities, in activities which are not unrelated to trades or businesses, or both.</li> </ul> </li> </ul>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches</li> <li>• Church-affiliated <i>elementary or high schools</i></li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Nonprofit church-affiliated colleges (<i>unless less than 25% of the college’s budget comes from government sources</i>)</li> <li>• Nonprofit religious charities (<i>unless less than 25% of the organization’s budget comes from government sources</i>)</li> <li>• Religious hospitals (assuming <i>more than 25% of their budget comes from government sources or patient revenue [performance of services]</i>)</li> </ul>
West Virginia	<p>W.Va. Code § 33-16E-2 (5) “Religious employer” is an entity whose sincerely held religious beliefs or sincerely held moral convictions are central to the employer’s operating principles, and the entity is an organization listed under 26 U.S.C. § 501(c)(3), 26 U.S.C. § 3121, or listed in the Official Catholic Directory published by PJ Kennedy and Sons. NOTE: 26 U.S.C. § 3121(w)(3) includes:</p> <ul style="list-style-type: none"> <li>a) “...a church, a convention or association of churches, or an elementary or secondary school which is controlled, operated, or principally supported by a church or by a convention or association of churches;</li> <li>b) “[a] church-controlled tax exempt organization described in § 501(c)(3), other than an organization which             <ul style="list-style-type: none"> <li>i. offers goods, services, or facilities for sale, other than on an incidental basis, to the general public, other than goods, services, or facilities which are sold at a nominal charge which is substantially less than the cost of providing such goods, services, or facilities and,</li> <li>ii. normally receives more than 25% of its support from either I) governmental sources, or II) receipts from admissions, sales of merchandise, performance of services, or furnishing of facilities, in activities which are not unrelated to trades or businesses, or both.</li> </ul> </li> </ul>	<p>Religious employers that <i>would not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Churches</li> <li>• Church-affiliated <i>elementary or high schools</i></li> </ul> <p>Religious employers that <i>might not</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Nonprofit church-affiliated colleges (<i>if less than 25% of the college’s budget comes from government sources</i>)</li> <li>• Nonprofit religious charities (<i>if less than 25% of the organization’s budget comes from government sources</i>)</li> </ul> <p>Religious employers that <i>would</i> have to provide contraceptive coverage:</p> <ul style="list-style-type: none"> <li>• Religious hospitals (assuming <i>more than 25% of their budget comes from government sources or patient revenue [performance of services]</i>)</li> </ul>