## Sample Letter: Birth Control

[NAME] [ADDRESS]

[DATE]

To Whom It May Concern:

I am enrolled in a [INSURANCE COMPANY NAME] plan, policy number [POLICY NUMBER]. My health care provider has prescribed the contraceptive [NAME OF CONTRACEPTIVE]. The Patient Protection and Affordable Care Act requires that my insurance provide coverage of this contraceptive with no cost sharing, however I have been asked to pay a [CO-PAY/DEDUCTIBLE/CO-INSURANCE] to obtain my contraception.

Under § 1001 of the Patient Protection and Affordable Care Act (ACA), which amends § 2713 of the Public Health Services Act, all non-grandfathered group health plans and health insurance issuers offering group or individual coverage shall provide coverage of and not impose cost sharing for certain preventive services for women. The list of women's preventive services which must be covered in plan years starting after Aug. 1, 2012 includes "all Food and Drug Administration approved contraceptive methods, sterilization procedures, and patient education and counseling for all women with reproductive capacity." (<u>http://www.hrsa.gov/womensguidelines/</u>) These methods are listed in the Food and Drug Administration's "Birth Control Guide." (Attached) My health insurance plan is non-grandfathered. Thus, the plan must comply with the women's preventive services.

I have spent [TOTAL AMOUNT] out of pocket on [NAME OF CONTRACEPTIVE], despite the fact that it should have been covered without cost sharing. I have attached copies of receipts which document these out of pocket expenses. I expect that [COMPANY NAME] will rectify this situation by ensuring that [NAME OF CONTRACEPTIVE] is covered by my plan without cost sharing in the future, reimbursing me for the out of pocket costs I have incurred during the period it was not covered without cost sharing, and changing any corporate policies that do not comply with the Affordable Care Act.

Sincerely,

[YOUR SIGNATURE]

Encl: FDA Birth Control Guide (available at <u>https://www.fda.gov/downloads/ForConsumers/ByAudience/ForWomen/FreePublications/UCM517406.pdf</u>)

Frequently Asked Questions about the Affordable Care Act (Part XII) (available at <a href="https://www.dol.gov/sites/default/files/ebsa/about-ebsa/our-activities/resource-center/faqs/aca-part-xii.pdf">https://www.dol.gov/sites/default/files/ebsa/about-ebsa/our-activities/resource-center/faqs/aca-part-xii.pdf</a>)

Copies of Receipts Documenting Out of Pocket Costs