


 STATE  
PLAY  
BOOK

FOR GENDER EQUITY

# REMOVE BARRIERS AND EXPAND WOMEN'S ACCESS TO BIRTH CONTROL

## The Problem

Despite enormous advancements in birth control access, women still struggle to get and afford birth control. When women are not able to use birth control consistently and correctly, they face an increased risk of unintended pregnancy, and related threats to their health, the health of their families, and their economic security. Even women who have insurance coverage continue to face barriers in trying to access birth control. Some insurance plans place arbitrary restrictions in their path: for example, some plans limit how many packs of pills a woman may get at one time, and some plans require that, if a woman wants coverage of an over-the-counter product, she must first obtain a prescription. These kinds of barriers can keep women from using birth control correctly or consistently since it may be impossible for a woman to get time off work or school, or to access a pharmacy due to lack of transportation or limited pharmacy hours. In one study, 18 percent of women reported running out of birth control and having problems resupplying.<sup>1</sup> These barriers are especially pronounced for women who rely on public transportation and whose work hours are not predictable.

Moreover, the Trump-Pence Administration is hostile to birth control, and has taken numerous steps to make it more difficult for women to find and afford birth control. Among these threats are new rules that allow virtually any employer or university with religious or moral objections to refuse to comply with the Affordable Care Act's (ACA) contraceptive coverage requirement. The ACA's contraceptive coverage requirement has been significant for women's health and economic security, because it requires all plans to cover the full range of birth control methods without any out-of-pocket costs to the individual. It is an incredibly popular benefit, with nearly 62.8 million women who now have this coverage. While the Trump-Pence Administration's rules are currently enjoined nationwide as a result of lawsuits, they continue to put the birth control benefit at risk for millions across the country.

Additionally, statutory requirements for Medicaid to cover family planning services and supplies without out-of-pocket costs and free of coercion and to allow enrollees to see the family planning provider of their choice ensure that birth control is accessible and affordable for women eligible for Medicaid. In fact, Medicaid pays for 75 percent of all publicly-funded family planning in the country. Yet, some women struggling to make ends meet do not qualify for traditional Medicaid. If they live in a state that has not expanded Medicaid or do not have special Medicaid family planning programs, they are forced to go without contraceptive coverage.

## The Solution

States should pass laws that remove barriers to birth control access, enshrine contraceptive coverage protections in state law, and expand access to birth control through a Medicaid family planning program.

For help crafting legislation, talking points, fact sheets, and for state-specific policy research and data, please contact us at [playbook@nwlc.org](mailto:playbook@nwlc.org).

## Basic Elements of the Solution

- Require coverage and dispensing of no less than one full year of birth control by both private and public insurance.
- Require coverage of over-the-counter methods of birth control without requiring a prescription by both private and public insurance.
- Enshrine the ACA's contraceptive coverage requirement in state law, requiring insurance plans regulated by the state to cover all FDA-approved birth control methods without out-of-pocket costs.
- Expand Medicaid eligibility for family planning services to individuals otherwise ineligible for Medicaid.

## Talking Points on the Solution

- Women should have access to birth control.
- Contraception is basic health care for women.
- Nearly all voters (96 percent) support women having access to birth control.<sup>2</sup> And nearly 8 in 10 voters (78 percent) see contraception as basic health care for women.<sup>3</sup>
- Birth control is such a core part of women's lives that 99 percent of sexually active women have used birth control at some point.
- Removing barriers to birth control so that women can plan, space, and prevent pregnancies is critically important for women's economic security. Access to birth control is linked to women's greater educational and professional opportunities and increased lifetime earnings.
- A woman's chances of unintended pregnancy increase considerably when barriers prevent her from using birth control consistently and correctly.
- Arbitrary barriers, such as limits on how many packs of birth control a woman can pick up at one time or unnecessary prescriptions, shouldn't keep women from accessing birth control.
- Access to a full year's supply of birth control can help women avoid gaps in using it and improve its effectiveness. When women were able to obtain a full year of birth control at one time, their odds of pregnancy decreased by 30 percent and odds of abortion decreased by 46 percent.<sup>4</sup>

- It can be difficult for women to pick up their birth control or see their health care provider when they need it. Women may not be able to get time off from work, have a ride to a pharmacy or clinic, or be able to get to a pharmacy or clinic when it is open.
- Putting the ACA birth control benefit in state law will protect our residents in the face of the Trump-Pence Administration's efforts to undermine the federal benefit.
- Women need coverage of all birth control methods without a co-pay so that they can use the specific birth control that is right for them without cost being an obstacle. Seven in 10 voters (71 percent) support the ACA provision that requires insurance plans to cover birth control without a co-pay.<sup>5</sup>
- Women who are uninsured and struggling to make ends meet shouldn't be left without birth control coverage.
- At least 19 states have passed laws requiring coverage of or supply of 6 or more months of birth control dispensed at one time (CA, CO, CT, DC, DE, HI, IL, ME, MA, MD, NV, NH, NJ, NM, NY, OH, OR, RI, VT, WA).
- At least 10 states have passed laws requiring coverage of some or all over-the-counter methods of birth control without requiring a prescription (CA, CT, DE, IL, MD, MA, NY, NV, OR, WA).
- At least 15 states have passed laws requiring coverage of all FDA-approved birth control methods without out-of-pocket costs (CA, CT, DC, DE, IL, ME, MD, MA, NV, NH, NM, NY, OR, VT, WA).

1 Kate Grindlay and Daniel Grossman, Prescription Birth Control Access Among U.S. Women at Risk of Unintended Pregnancy, 25(3) J. of Women's Health 249 (Dec. 14, 2015).

2 Results from a National Survey of Voters on Federal Policy Around Contraceptives. Views on Birth Control, PERRY UNDEM RESEARCH/COMM. (Dec. 1, 2017) <https://view.publitas.com/perryundem-research-communication/views-on-birth-control-report-pdf/page/3>

3 *Id.*

4 Diana Greene Foster et al., Number of oral contraceptive pill packages dispensed and subsequent unintended pregnancies, 117(3) Obstetrics & Gynecology 566 (March 2011).

5 PERRY UNDEM RESEARCH/COMM., *supra* note 2. <https://view.publitas.com/perryundem-research-communication/views-on-birth-control-report-pdf/page/3>