NATIONAL WOMEN'S LAW CENTER

Justice for Her. Justice for All.

MAY 2021 | FACT SHEET

REPRODUCTIVE RIGHTS & HEALTH

SUPPORT THE ACCESS TO CONTRACEPTION FOR SERVICEMEMBERS AND DEPENDENTS ACT OF 2021

People Who Rely on the Military for Health Care Deserve Comprehensive Birth Control Coverage and Counseling

Senator Shaheen and Representatives Speier, Escobar, and Strickland introduced the Access to Contraception for Servicemembers and Dependents Act of 2021 that will improve gaps to accessing contraception for members of the Armed Forces and their families. The Access to Contraception for Servicemembers and Dependents Act builds upon requirements for birth control counseling and clinical practice updates that were incorporated into the National Defense Authorization Act for fiscal years 2016 and 2017. Access to birth control, contraceptive counseling, and related services is critical to promote both military readiness and quality of life for all servicemembers.

INDIVIDUALS ENROLLED IN TRICARE CURRENTLY FACE BARRIERS TO ACCESSING CONTRACEPTION

Under the current TRICARE program, servicemembers of the Armed Forces on active duty have coverage of all prescription drugs, including contraception, without cost-sharing requirements. However, servicemembers **not on active duty** and **dependents of servicemembers** still have cost-sharing when they obtain birth control outside of a military medical treatment facility (MTF). As a result, these TRICARE beneficiaries can face cost-related barriers to accessing contraceptive coverage.

These barriers have real-world impacts on the decisions made by TRICARE beneficiaries, as documented by contacts to the National Women's Law Center's CoverHer hotline:

- Julia, the wife of a non-active-duty servicemember, reports being charged out-of-pocket costs for a 3-month supply of birth control. Due to the costs, she can no longer afford her prescription.
- Tallulah is a student covered by her parents' TRICARE plan. She is interested in transitioning from pills to an IUD, to better suit her needs. She has been trying over a year to get an IUD, but TRICARE continues to deny coverage for the device. It would cost her more than $800 to pay for the IUD, which she cannot

afford.

Studies have shown that when cost barriers to the full range of methods of contraception are eliminated, patients are more likely to use their preferred contraceptive method that better meets their needs. Consequently, individuals are more likely to use contraception correctly and consistently. This improves servicemembers' readiness for deployment and quality of life."

BIRTH CONTROL COVERAGE UNDER TRICARE IS LESS ROBUST THAN IN PRIVATE INSURANCE PLANS

TRICARE's birth control coverage is less comprehensive than what is now required for most private health plans. Under the Affordable Care Act (ACA), which does not extend to TRICARE, group and individual health plans must cover – without cost-sharing – all Food and Drug Administration (FDA)-approved birth control methods and related services (i.e., insertion, removal, and follow-up), and any related education and counseling.

THE BILL WOUD ENSURE CONTRACEPTIVE COVERAGE FOR ALL TRICARE ENROLLEES

Contraception is essential care that is critical for the health of anyone who can become pregnant. People who rely on TRICARE must have coverage of this critical service as others now have. By making a technical fix to the statutory provision that imposes cost sharing, this bill would bring TRICARE in line with standard contraceptive coverage of other health insurance plans.

- The bill would provide contraceptive services without cost-sharing (that is without co-pay, co-insurance, or deductible) regardless of whether services were provided through a facility of the uniformed services, the TRICARE retail pharmacy program, or the national mail-order pharmacy program.

- The bill would ensure that the no cost-sharing provision would extend to non-active-duty servicemembers and the family members and dependents of both active-duty and non-active-duty servicemembers of the Armed Forces

PEOPLE WHO NEED BIRTH CONTROL UNDER TRICARE

- Women comprise more than 18% of members of the Armed Forces.

- More than 700,000 female spouses and dependents of members of the Armed Forces on active duty are of reproductive age.

- In 2019 the TRICARE program covered more than 1,570,000 women of reproductive age. Additionally, thousands of transgender dependents of members of the Armed Forces are covered by TRICARE.

THE BILL WOULD REQUIRE A UNIFORM STANDARD CURRICULUM FOR FAMILY PLANNING EDUCATION

Recognizing the importance of family planning for military readiness and members' quality of life, this bill would enhance existing military family planning education programs by requiring the Secretary of Defense to establish a uniform standard curriculum that can be used in family planning education programs for all members of the Armed Forces. This curriculum would emphasize the importance of making informed decisions regarding family planning by providing current, medically-accurate information to servicemembers in a clear, user-friendly manner.

Comprehensive family planning education both reduces unintended pregnancy and promotes military readiness. Family planning, which can include consideration of servicemembers' training and deployment schedules and working conditions, can minimize preventable disruptions to the military's operations and contribute to the overall health of the force.[1]

THE BILL WOULD IMPROVE ACCESS TO EMERGENCY CONTRACEPTION FOR SURVIVORS OF SEXUAL ASSAULT

In 2019, military departments received more than 7,800 reports of sexual assaults involving members of the Armed Forces. The Department of Defense has ensured, through regulation, that emergency contraception is available for

sexual assault survivors who present at military treatment facilities for care. In supporting these efforts, this bill would codify and expand current regulations by requiring military treatment facilities provide survivors of sexual assault comprehensive and medically accurate information regarding all methods of emergency contraception approved by the FDA. The bill would further require the provision of emergency contraception or related prescription upon request by the survivor.

Such provisions ensure that someone who is sexually assaulted and present at a military treatment facility is given the critical and time-sensitive medical counseling and care that they may need.