

2025 State Legislation on Birth Control: Attacks Continue but State Advocates Work to Protect and Expand Contraceptive Access

Everyone should have access to the birth control they want or need, when they want or need it, without any barriers. This is especially important for young people, people of color, and the LGBTQ+ community.¹ However, when the Supreme Court unjustly overturned *Roe v. Wade*, it not only took away people's constitutional right to abortion, but also laid the groundwork to eliminate the right to birth control.² In the years that have followed, both the right and access to contraception have been increasingly under threat.³

In the 2025 state legislative sessions, there were a range of measures introduced and considered that would have undermined birth control rights and access. Yet, at the same time, state advocates and legislators led critical efforts to protect and expand birth control access.

Birth Control Rights and Access are Increasingly Threatened in The States.

The effort to undermine the right and access to birth control on the state level was happening well before the Supreme Court overturned *Roe v. Wade*, and has only intensified since that decision, with anti-reproductive rights extremists following the anti-abortion playbook.⁴ The 2025 legislative sessions were notable for a few of the ways extremists went after contraception, specifically by: (1) enshrining fetal personhood; (2) targeting certain methods of birth control; (3) allowing refusals of birth control; and (4) refusing to move forward with Right to Contraception Acts.

Enshrining “Fetal Personhood” Definitions in Law that Threaten Contraception

In South Carolina, a senator with ties to Personhood South Carolina introduced a bill – called the Unborn Child Protection Act – seeking to grant legal rights starting at fertilization.⁵ It sought to worsen a total abortion ban in the state and is South Carolina’s most restrictive and dangerous abortion ban proposal to date. The dangers included, but were not limited to, the criminalization of abortion patients, providers, and those who support them; incentivizing the targeting of pregnant people through civil penalties; and blocking information about health care.⁶ As part of the extreme changes it proposed to existing law, the bill added a medically inaccurate definition of “contraception,” and amended an existing definition of “contraceptive.”⁷ This led to significant confusion and fear, with concerns that the bill would have made certain birth control methods – specifically emergency contraception and IUDs – illegal.⁸

The bill was sent to committee in February 2025 the state legislative session and appeared to be dead, but seven months later, in September 2025, extremist South Carolina legislators fast tracked the bill. At a hearing on October 1, 2025, there was powerful public opposition and testimony, but not all experts were able to testify. Lawmakers moved forward despite overwhelming public opposition; the Senate Medical Affairs Subcommittee scheduled another hearing, on November 18, where they discussed the bill, but did not accept any public testimony.⁹ Given how extreme the proposal is, the bill ultimately did not move forward in the Subcommittee hearing, ending with a 2-3 vote and four of the six Republicans on the panel declining to vote.¹⁰

This bill shows the dangers to birth control of efforts to grant legal rights to embryos and fetuses,¹¹ as well as how confusion about the scope of state abortion restrictions can create a chilling effect on birth control.

Targeting Certain Methods of Birth Control

In Indiana, there was an effort to carve certain birth control methods out of an otherwise proactive contraceptive access expansion. Rep. Jim Lucas introduced a bill to create a new birth control program in the state, expanding access to birth control for people with low incomes.¹² After introduction, Rep. Joanna King, a legislator who has supported efforts to defund Planned Parenthood, offered an amendment to narrow the definition of birth control by removing condoms, emergency contraception, implants, and IUDs – but adding fertility awareness-based methods.¹³ This change to target certain methods of birth control was opposed by lawmakers

who support reproductive health access, the Indiana chapter of the American College of Obstetricians and Gynecologists, and reproductive health state advocates, who rightly called this out as “an attack on contraceptives” that was “based on anti-science misinformation.”¹⁴ The bill ultimately died in committee. This attempt is concerning not only because it would have undermined an otherwise proactive contraceptive access bill, but also because it is representative of increasing efforts to target and eliminate access to some forms of contraception.¹⁵

Allowing Birth Control Refusals

Laws that allow refusals of health care based on personal beliefs endanger people’s health and lives.¹⁶ At the state level, more bills are being introduced that allow health care providers and institutions to deny care based on personal beliefs, which could allow refusals to provide birth control. For example, in July 2025, a bill was passed in Tennessee to allow healthcare providers — including individuals, institutions, and insurers — to refuse to participate in or pay for healthcare procedures, treatments, or services that conflict with their personal beliefs.¹⁷ Birth control is not specifically mentioned in the bill, but the language in the bill is drafted broadly and the bill’s author said it would allow pharmacists to refuse to dispense birth control.¹⁸ Pharmacy refusals can have devastating consequences, and are particularly stark in pharmacy deserts, areas where residents have inadequate access to pharmacies.¹⁹ This bill threatens great harm to Tennesseans’ ability to access the care they need, and also is dangerous because it is based on a model bill being shopped around to states by an anti-reproductive health organization. Similar bills are likely to continue to crop up in state legislatures across the country in future legislative sessions.

Right to Contraception Acts were Stalled – or Vetoed

Right to Contraception Acts were introduced in at least twelve states in 2025. These commonsense, popular measures would enshrine a right to birth control in state law, protect against attempts at the state level to restrict contraceptive access, and offer protection if the federal constitutional right to birth control were to be overturned. Yet, legislators failed to pass Right to Contraception Acts in at least eleven states across the country in the 2025 legislative session.²⁰ In Virginia, Governor Youngkin – for the second time – vetoed a Right to Contraception Act.²¹ When vetoing the bill, Governor Youngkin asserted deceptive claims about the bill, including that it would harm parental rights, and he misused the Supreme Court’s 2014 *Hobby Lobby* decision to claim that the bill needed a broad

religious exemption.²² The claims Governor Youngkin made are false and harmful,²³ and are illustrative of how those who want to undermine birth control rights and access are hiding their attacks behind misleading rhetoric.

State Advocates Continue to Lead the Way in Expanding Birth Control Access.

Despite growing attacks on birth control, states advocates continue to make gains in preserving and expanding the right and access to contraception. A range of proactive contraceptive access birth control bills were introduced, considered, and passed in the states in 2025.²⁴ Two significant victories in state contraceptive access deserve particular attention.

Tennessee Enshrined a Right to Birth Control and Fertility Care

Tennessee passed a bill to enshrine the right to birth control and fertility care in state law.²⁵ The bill was sponsored by Rep. Iris Rudder and Sen. Becky Massey, had bipartisan support, and passed the Senate unanimously. Advocates for Women's and Kids' Equality (AWAKE), a Tennessee-based grassroots nonprofit organization, led on this bill,²⁶ which required countering misinformation attempts from anti-reproductive health extremists in the Tennessee House who tried to stop the bill by conflating birth control with abortion and arguing it would enable the destruction of embryos.²⁷ Republican Governor Lee signed the bill, despite attempts by Tennessee House members to get him to veto it, and it became effective in July 2025.²⁸ Its passage means that Tennesseans now have an explicit right to fertility care and contraceptives and that healthcare providers have the explicit right to perform fertility treatments and administer contraceptives. This is an important victory for contraceptive rights and access in Tennessee, offers a model for other states of bipartisan success, and demonstrates that forward movement is possible in a southern state.

Maryland Worked to Implement a Contraceptive Access Measure

In Maryland, state advocates helped to pass a bill that created the Maryland Collaborative to Advance Implementation of Coverage of Over-the-Counter Birth Control, to help ensure that people are getting the birth control they need without cost sharing.²⁹ This is a critical next step in Maryland's work to require insurance coverage of over-the-counter birth control, which it did in 2016 when it passed the Contraceptive Equity Act.³⁰ This 2025 legislation recognizes that passing the requirement is

meaningless if it is not implemented and made real for people. The Maryland Collaborative, created under this 2025 bill, will study existing barriers to obtaining over-the-counter birth control, including cost, insurance coverage, and pharmacy availability. The collaborative will also build on existing resources that detail best practices for implementing bills that require over-the-counter coverage of birth control and provide evidence-based recommendations for the Governor and General Assembly.³¹ Not only is this bill critical to ensure meaningful contraceptive coverage for Marylanders, but it shows that even in states that have passed proactive measures, there is more work to do; state advocates and legislators can focus on effective implementation.

Everyone deserves the right and access to birth control without barriers, judgment, and misinformation. This right should be free from coercion and political influence, especially given the long history of reproductive coercion in the United States.³² The threat to birth control access is real and pressing and state advocates continue to do critical work in protecting and expanding birth control access in their states, despite opposition from anti-reproductive health extremists. The work of state advocates has always been key to advancing true reproductive freedom, including the right and access to birth control, but it is even more so now, with a federal government that actively seeks to undermine birth control access.³³

- 1 See generally Jamie Hart, Joia Crear-Perry & Lisa Stern, *US Sexual and Reproductive Health Policy: Which Frameworks Are Needed Now, and Next Steps Forward*, 112 Am. J. Public Health S518 (2022), <https://ajph.aphapublications.org/doi/full/10.2105/AJPH.2022.306929>.
- 2 See *The Right to Contraception: Deeply Rooted in Our Law and Society, But in Jeopardy and in Need of Policymakers' Attention* Nat'l Women's L. Ctr. (June 26, 2023), <https://nwlc.org/resource/the-right-to-contraception-deeply-rooted-in-our-laws-and-society-but-in-jeopardy-and-in-need-of-policy-makers-attention/>.
- 3 See generally *Birth Control Under Threat: How Birth Control Rights and Access are Being Undermined Since Roe v. Wade Was Overturned*, Nat'l Women's L. Ctr. (April 2025), <https://nwlc.org/resource/birth-control-under-threat-how-birth-control-rights-and-access-are-being-undermined-since-roe-v-wade-was-overturned/> (discussing how contraception has been targeted in the years following the *Dobbs* decision).
- 4 *Id.*
- 5 Unborn Child Protection Act, S. 323, 126th Gen. Assemb., Reg. Sess. (S.C. 2025); Anna Claire Vollers, *GOP Lawmakers Push to Charge Women with Homicide for Seeking Abortions*, Stateline (March 6, 2025), <https://stateline.org/2025/03/06/gop-lawmakers-push-to-charge-women-with-homicide-for-seeking-abortions/> (noting that the legislator who introduced this bill, Sen. Richard Cash, stated "... I don't see how any of us could be satisfied with having a law on the books that does not actually protect human life beginning with the biological beginnings of human life, which is fertilization.").
- 6 See also *NWLC Submits Testimony in Opposition to South Carolina's Most Restrictive and Dangerous Proposed Abortion Ban to Date*, Nat'l Women's L. Ctr. (Oct. 29, 2025), <https://nwlc.org/resource/nwlc-submits-testimony-in-opposition-to-south-carolinas-most-restrictive-and-dangerous-proposed-abortion-ban-to-date/>.
- 7 See Unborn Child Protection Act, S. 323, 126th Gen. Assemb., Reg. Sess. (S.C. 2025)..
- 8 See, e.g., Jessica Valenti, *South Carolina Bill Would Ban Contraception & Pro-Choice Websites, Abortion, Every Day* (Feb. 6, 2025), <https://jessica.substack.com/p/south-carolina-bill-would-ban-contraception>.
- 9 See *Stop Senate Bill 323*, Women's Rights and Empowerment Network (WREN), https://www.scwren.org/advocacy-resources/stop-senate-bill-323/?blm_aid=47679 (last visited Nov. 18, 2025).
- 10 Skylar Laird, *Senators Reject SC Abortion Ban Proposal Touted as Strictest Nationwide*, S.C. Daily Gazette (Nov. 19, 2025) <https://scdailygazette.com/2025/11/19/senators-reject-scs-abortion-ban-touted-as-strictest-nationwide>.
- 11 See also *The Anti-Abortion Movement Has Been Pushing a "Fetal Personhood" Strategy – It's Not What You Think*, Nat'l Women's L. Ctr., <https://nwlc.org/resource/the-anti-abortion-movement-has-been-pushing-a-fetal-personhood-strategy-its-not-what-you-think/> (last updated Sept. 4, 2025) (providing additional information about the effort to establish legal rights for embryos, fetuses, and fertilized eggs); Survey: *People Believe Negative Consequences of Giving Legal Rights to Fetuses and Embryos are Likely to Happen, But The Intensity of Belief Varies Based on Consequence*, Nat'l Women's L. Ctr. (July 2025), <https://nwlc.org/wp-content/uploads/2025/04/Believability-Factsheet.pdf> (showing that polling on fetal personhood indicates that access to birth control remains a key concern among voters when they are asked about consequences of fetal personhood, although many remain unaware of how personhood laws could affect birth control).
- 12 H.B. 1169, 124th Gen. Assemb., Reg. Sess. (Ind. 2025).
- 13 The amendment also decreased the scope of people who would benefit from the bill.
- 14 Casey Smith, *Condoms, IUDs Removed From Indiana Bill Seeking to Expand Birth Control Access*, Ind.Cap. Chronicle (February 12, 2025), <https://indianacapitalchronicle.com/2025/02/12/condoms-iuds-removed-from-indiana-bill-seeking-to-expand-birth-control-access/>.
- 15 See *supra* note 3.
- 16 See *Refusals to Provide Health Care Threaten the Health and Lives of Patients Nationwide*, Nat'l Women's L. Center (May 15, 2023), <https://nwlc.org/resource/refusals-to-provide-health-care-threaten-the-health-and-lives-of-patients-nationwide-2/>.
- 17 Medical Ethics Defense Act, S.B. 0955, 114th Gen. Assemb., Reg. Sess. (Tenn. 2025).
- 18 Chris Salvemini, *Republican TN Bill Allowing Healthcare Providers to Deny Patients Some Treatments Based on Personal Beliefs Signed into Law*, 10NEWS (Apr. 25, 2025) <https://www.wbir.com/article/news/local/governor-bill-lee-signs-bill-into-law-allowing-treatments-to-be-denied-based-on-personal-belief/51-22a1d0a7-dd7e-4123-b727-a60398ec0477> ("The bill prevents healthcare professionals from being forced to provide certain treatments, but it does not allow them to refuse care to specific groups of people," [Tennessee State Senator Ferrell] Haile said.").
- 19 See *Pharmacy Refusals 101*, Nat'l Women's L. Ctr. (July 14, 2025), <https://nwlc.org/resource/pharmacy-refusals-101/>; *The Access to Birth Control Act: Ensuring People Get Their Birth Control at the Pharmacy*, Nat'l Women's L. Ctr. (July 16, 2025), <https://nwlc.org/resource/the-access-to-birth-control-act-ensuring-people-get-their-birth-control-at-the-pharmacy/>.
- 20 Chelsea Boyd, *Case Studies: Examining Right-to-Contraception State-Level Legislative Processes*, R Street (Nov. 6, 2025), <https://www.rstreet.org/research/case-studies-examining-right-to-contraception-state-level-legislative-processes/>.
- 21 H.B. 1716, 406th Gen. Assemb., Reg. Sess. (Va. 2025) (identifying the bill that would have established a right to obtain contraceptives). Governor Youngkin also vetoed the Contraceptive Equity Act which would have built upon existing federal and state law to require insurance coverage of the specific birth control a person needs, as recommended by a medical provider. See H.B. 2371, Virginia Legislature, 406th Gen. Assemb., Reg. Sess. (Va. 2025)..
- 22 See Josh Israel, *Gov. Youngkin Vetoes Bill to Protect Access to Contraception*, The Virginia Independent (May 5, 2025), <https://virginiaindependentnews.com/reproductive-rights/gov-youngkin-vetoes-bill-contraception-access-sears-senate-house-delegates-birth-control/>.
- 23 See Nat'l Women's L. Ctr., *supra* note 3.
- 24 See Talia Curhan et al., *State Policy Trends Midyear Analysis*, Guttmacher (June 2025), <https://www.guttmacher.org/2025/06/state-policy-trends-midyear-analysis>. Of note, Maine passed a law that requires insurance coverage for over-the-counter contraception, including emergency contraception, and Oklahoma passed a bill requiring insurance coverage for six or twelve months of birth control.
- 25 Fertility Treatment and Contraceptive Protection Act, S.B. 0449, 114th Gen. Assemb., Reg. Sess. (Tenn. 2025).
- 26 See *Our Birth Control and Fertility Care Is Not Up to Politicians, AWAKE*, <https://www.awaketn.org/fertility-care-and-contraceptive-protection-act> (last visited Nov. 18, 2025).
- 27 See Anita Wadhwani, *Tennessee to Become First State in South to Protect Access to IVF, Birth Control* (June 18, 2025), <https://tennesseelookout.com/2025/06/18/tennessee-to-become-first-state-in-south-to-protect-access-to-ivf-birth-control/>.
- 28 Tori Gessner, *Gov. Lee Signs Bill Protecting IVF, Contraceptives Access, Despite 11 House Republicans Pushing for Veto*, WKRN.com (Apr. 24, 2025), <https://www.wkrn.com/news/tennessee-politics/tn-governor-signs-bill-protecting-ivf-contraceptives-access/>.
- 29 Maryland Commission for Women – Maryland Collaborative to Advance Implementation of Coverage of Over-the-Counter Birth Control, S.B. 0674, 447th Gen. Assemb., Reg. Sess. (Md. 2025).
- 30 *Maryland's Contraceptive Equity Act Advances Birth Control Access*, Ibis Reproductive Health, (June 2016), <https://www.ibisreproductivehealth.org/news/marylands-contraceptive-equity-act-advances-birth-control-access>.
- 31 See generally Victoria Nichols and Bria Goode, *Free the Pill and Cover it Too: Strategies for Making OTC Birth Control Coverage Work in the Real World*, Ibis Reproductive Health (Nov. 2024), <https://www.ibisreproductivehealth.org/publications/free-pill-and-cover-it-too-strategies-making-otc-birth-control-coverage-work-real-world> (discussing successful implementation of insurance coverage of over-the-counter birth control at the state and national levels).
- 32 See, e.g., National Women's Law Center, *Forced Sterilization of Disabled People in the United States* (Jan. 2022), <https://nwlc.org/resource/forced-sterilization-of-disabled-people-in-the-united-states/>.
- 33 See *The Trump Republican New Tax and Budget Law is Devastating for Women's Health, Including Reproductive Health* Nat'l Women's L. Ctr. (Aug. 28, 2025), <https://nwlc.org/resource/the-trump-republican-new-tax-and-budget-law-is-devastating-for-womens-health-including-reproductive-health/>; Lauren Wallace, *All The Ways Project 2025 Wants to Undermine Birth Control Access*, Nat'l Women's L. Ctr. (2024), <https://www.nwlc.org/all-the-ways-project-2025-wants-to-undermine-birth-control-access>; *All The Ways Project 2025 Wants to Undermine Birth Control Access - National Women's Law Center*.