Dear Colleagues,

Three full years have elapsed since we celebrated the rollout of the Affordable Care Act (ACA) provision requiring coverage of women's preventive services recommended by the Institute of Medicine. This provision includes a requirement that most insurance plans cover FDA-approved female contraceptive methods with no co-payment or deductible. The coverage must also include clinical services, including patient education and counseling needed for provision of these contraceptive methods.

Health insurance carriers must cover at least one product in each of the 18 distinct female contraceptive method categories that the FDA has identified in its current Birth Control Guide. Many women who could not previously afford contraceptives or whose choices were limited because of prohibitive costs now have access to effective methods that meet their own particular needs.

Despite the existence of this ACA provision for the past 3 years, insurance carriers vary in terms of how they are adhering to the guidelines for contraceptive coverage—thereby keeping many women from fully benefiting from this provision. In fact, two recent studies evaluating health insurance coverage revealed numerous violations of the requirements by a large number of insurance carriers across several states. The National Women’s Law Center (NWLC) reviewed more than 100 plan documents from issuers in the new marketplaces in 15 states, and found that 33 insurance carriers in 13 states offered birth control coverage that did not comply with the ACA. The Kaiser Family Foundation described contraceptive policies used by health insurance carriers as being not easily accessible and not clearly defined.

The most commonly identified violation in these studies was a failure to cover all FDA-approved methods. The method(s) not covered varied with different carriers but included progestin implants, contraceptive patches and vaginal rings, over-the-counter contraceptives, and the emergency contraceptive pill Ella. Several insurance carriers were found to impose impermissible cost-sharing on methods such as IUDs and sterilization. Some carriers imposed limitations and cost-sharing on the services associated with provision of contraceptive methods, including office visits for injectable contraceptives and birth control counseling. Other violations included requiring cost-sharing for brand-name contraceptives without generic equivalents and excluding sterilization coverage for dependent children, which includes adults up to age 26. In May 2015, as a result of these two studies’ findings, the U.S. Departments of Health and Human Services, Labor, and Treasury issued FAQs About Affordable Care Act Implementation to help insurance companies and consumers better understand the scope of coverage of preventive services required under the ACA.

We must ensure that our patients have access to all FDA-approved female contraceptive methods and related services, with no co-payment or deductible. We have a voice. In one state, after the regional Planned Parenthood and the NWLC brought violations to the attention of insurance regulators, a bulletin clarifying the requirements was sent to health insurance carriers. NWLC operates a national hotline (1-866-745-5487) and website to assist women having difficulty securing coverage for birth control by providing information on the requirements, assisting with filing appeals with insurance companies, and filing complaints with government agencies that regulate insurance plans.

Through the ACA, we have made a tremendous step forward in enhancing access to care for women. As always, however, there are hurdles to overcome and there are risks that the gains we have made will be reversed. Together we can be a mighty force in overcoming these hurdles and in protecting the good work that has been done.

Beth Kelsey, EdD, APRN, WHNP-BC


Web resources
A. www.fda.gov/downloads/ForConsumers/ByAudience/ForWomen/FreePublications/UCM356451.pdf
C. www.coverher.org