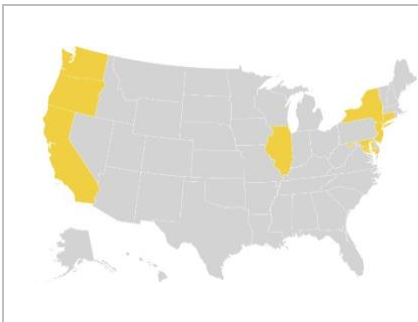


Summary Report

Insurance Coverage of Contraception

Contraception plays a pivotal role in the well-being and health of people worldwide, and allows individuals to reduce unintended pregnancies and safely space their pregnancies. Because of the Affordable Care Act (ACA), approximately 64.3 million women now have coverage of birth control without out-of-pocket costs. Recognizing additional gaps in access after finalization of the ACA’s preventive services guidance, 21 states have enacted their own laws that expand beyond the federal contraceptive coverage requirements. The scope of contraceptive coverage laws varies by state, but may apply to both private and public health insurance programs. These laws generally expand the range of contraceptive methods and services that are covered without cost-sharing, and limit insurer practices of medical management, such as prior authorization or step therapy, which create barriers to access.

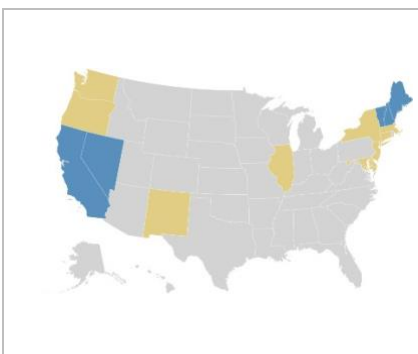
This dataset is longitudinal, covering laws mandating insurance coverage of contraception in effect from January 1, 2016 through December 31, 2021. Additional maps and tables are available by visiting www.lawatlas.org.



Coverage of All Contraceptives Unless Therapeutic Equivalent

As of December 31, 2021, nine jurisdictions require all contraceptives be covered without cost-sharing in private insurance unless there is a therapeutic equivalent. One jurisdiction (DC) extends this requirement to Medicaid.

Jurisdictions: 9 (CA, CT, DC, IL, NJ, NY, OR, WA)



Coverage of Over-the-Counter (OTC) Contraceptives

As of December 31, 2021, 16 jurisdictions require coverage of over-the-counter (OTC) contraceptives, such as condoms, spermicide, or Plan B. Of those 16 jurisdictions, 5 explicitly require a prescription for coverage, while 11 do not.

Jurisdictions: 16 (CA, CT, DE, DC, IL, MD, MA, ME, NJ, NH, NM, NY, NV, OR, VT, WA)