

## **Coverage of the Women's Preventive Health Services: Calling Your Health Insurance Plan**

The health care law makes preventive care more accessible and affordable to millions of American women by requiring all new health insurance plans to cover certain women's preventive health services without cost-sharing. These are:

- (1) Contraceptive methods and counseling;
- (2) Well woman visits;
- (3) Counseling regarding sexually transmitted infections including HIV
- (4) Screening for HIV
- (5) DNA co-testing for HPV
- (6) Breastfeeding support, supplies, and counseling;
- (7) Screening and counseling for interpersonal and domestic violence; and
- (8) Screening for gestational diabetes.

*New health plans must comply with the women's preventive services requirement and provide these critical health services for women without a co-pay, starting with the next plan year on or after August 1, 2012. Many employer-sponsored plans have a plan year beginning January 1. Many student plans have a plan year that starts near the beginning of the fall semester. This means that students at colleges and universities will be among the first to have access to coverage for these critical health services without cost sharing.*

### **Find out if you are covered!**

Call the phone number on your insurance card. That number should connect you to customer service for your insurance company and should have the most up to date information about your health plan. Remember, the person answering the phone is not the person making the decisions. If the person with whom you are speaking is unable to answer a question you have, you might want to ask to speak with a supervisor. If you do not believe you are being told correct information, you may want to inform your employer or school administration.

Please refer to the attached flow chart for the questions you should ask your plan representative. Be aware that if the start of your next plan year is more than a month away, your plan may not have finalized information on the new benefits.

### **Grandfathered Health Plans and the Women's Preventive Health Services Requirement**

Health plans that existed before the health care law are considered "grandfathered" into the new system. Grandfathered plans don't have to follow the new preventive services coverage rules. If your plan representative informs you that the plan is grandfathered, it is still worth asking if the plan is providing the women's preventive services because some grandfathered plans have decided to offer the new benefits.

If your plan is grandfathered, it does not mean you will never get these services. Plans cease to be grandfathered and are considered “new” if they making certain changes that include: cutting benefits significantly; increasing co-insurance, co-payments, or deductibles or out-of-pocket limits by certain amounts; decreasing premium contributions by more than 5%; or, adding or lowering annual limits. Student health plans should not be grandfathered for any student that first enrolled after March 23, 2010.

## **Plans Exempted From Immediate Implementation of the Women’s Preventive Health Services Requirement**

If your plan representative answers “no” when you ask whether coverage of women’s preventive health services will begin at the start of the plan year, ask why. There are a few reasons, besides grandfathered status, why a health plan might not need to immediately implement the women’s preventive health services. Below is more detail on the response you might hear, as well as a follow up question if you do.

- **Your employer, school or university has a religious objection to providing contraceptive coverage.** Such nonprofits employers, schools and universities, can receive a one year grace period before offering contraceptive coverage. Employees and students at those organizations will not receive the birth control benefit until August 1, 2013. In addition, segment of religious employers, such as churches and other houses of worship, are exempt from this contraceptive coverage requirement. However, employees and students at these organizations still should have access to the other preventive services without cost-sharing during that one year period.  
*Follow up question: The religious accommodations only apply to contraceptive coverage. Can you confirm that I receive coverage for the other women’s preventive health services, such as a well-woman visit as of [date of the plan year]?*
- **Your student health plan is self-funded.** Self-funded student health plans do not have to comply with the preventive services requirement.  
*Follow up question: Do you know if the school is planning on offering coverage of any of the preventive health services without cost-sharing even though it is not required to?*

## **List of Sample Questions**

Assuming your plan is going to start covering the women’s preventive health services without cost sharing, you might want to ask about a particular service you plan to use. For example:

- *Is it possible to find out if a specific birth control pill will be covered without a copay?*
- *Will I have to go to the school health clinic to receive the well woman visit or other women’s preventive services without a copay?*
- *What services associated with an IUD are covered? Can I go to any provider?*

- *Do you have details on how breastfeeding support and supplies will be covered?*

**If you feel you are not receiving the women's preventive health services benefits to which you are entitled, contact the National Women's Law Center at 1-866-PILL4US or [pill4us@nwlc.org](mailto:pill4us@nwlc.org).**

## Coverage of the Women's Preventive Health Services: Script for Calling Your Health Insurance Plan

*Q: Hi. I understand that under the health care law, new health plans will be providing coverage for women's preventive services, such as a well woman visit and birth control, with no cost sharing. I am trying to find out whether my plan will be providing these services. Can you tell me when my plan year or policy year starts and whether my plan is grandfathered under the health care law?*

**Plan is Not Grandfathered**

*Q: That means the plan should be providing coverage for the women's preventive services without cost sharing as of (DATE OF NEXT PLAN YEAR). Is that correct?*

**No**

*Q: Do you know why the plan is not following this requirement?*

See "Plans Exempted" on accompanying guide for reasons your plan might not be required to cover the preventive services.

**Yes**

If you run into any problems learning about your coverage or identify any potential barriers, contact the National Women's Law Center at 1-866-PILL4US or pill4us@nwlc.org

*Q: Do you have information on what services are covered with no cost-sharing?*

See "List of Sample Questions" on accompanying guide for some specific questions you might want to ask.

**Plan is Grandfathered**

*Q: Do you know if the plan will still be providing the women's preventive services without cost sharing?*

See "Grandfathered Plans" on accompanying guide to learn more about what it means for a plan to be grandfathered.