FACT SHEET

Five Questions You May Be Getting About Birth Control Coverage

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Under the health care law, all new insurance plans must cover all FDA-approved methods of contraception, counseling and sterilization without additional costs like co-pays and deductibles. However, some women are still being charged. Here are five common questions you may be getting asked about the birth control benefit and some simple answers to help your customers.

Question 1: “I was charged a co-pay for my birth control? Isn’t there a law about this?”

Answer 1: “Yes, under the health care law, all new insurance plans must cover all FDA-approved methods of birth control without additional costs like co-pays and deductibles. In most cases, women with private insurance should not be charged any additional out-of-pocket costs at the pharmacy.”

Question 2: “Does that law apply to my insurance plan?”

Answer 2: “The law applies to the vast majority of private insurance plans. There are a small number of instances in which the law does not apply – for example, this benefit may not have kicked in for your plan yet (formally called ‘being grandfathered’). This means that your health plan existed before March 23, 2010 and hasn’t changed in any significant way. The best way to find out if the benefit has kicked in for your plan is to ask your plan administrator or, if you have insurance through your employer, your HR department.”

Question 3: “Could coverage for the type of birth control I use not be required under the law?”

Answer 3: “This is highly unlikely. The law calls for all FDA-approved methods to be covered. However, plans may choose to cover the generic versions of brand name birth control if one is available. However, if no generic versions are available, the plan must cover the brand name drug without out-of-pocket costs. In addition, if a generic is available but her medical provider determines that it is not medically appropriate for her, the plan must allow for a waiver that gives her coverage of the brand name drug. One other thing – plans aren’t required to cover over-the-counter drugs unless the customer has a prescription for it.”
Question 4: “I’ve heard about insurers, states, stores and even pharmacists opting out or refusing to participate in the birth control benefit. They can’t do that, can they?”

Answer 4: “This is a federal law so insurers, states, stores and pharmacists do not get to ‘opt out.’ You may be confused about some rules that apply to employers with religious objections to birth control:

• A few employers with religious objections to birth control do not have to cover it:
  • Houses of worship, like churches, are exempt from having to provide birth control coverage to their employees.
  • In addition, the Supreme Court, in what is known as the Hobby Lobby case, recently decided that a small set of closely-held for-profit companies could deny their employees birth control coverage based on the owners religious beliefs.

However, if your customer works for a non-profit organization that objects to birth control coverage for religious reasons, your customer SHOULD BE getting the coverage without additional costs like co-pays and deductibles through her insurance company. There is a rule that allows these employers not to cover it as long as they notify their insurance plan, so that the plan can continue to provide the coverage.

Question 5: “How can I get help if my insurer has denied me coverage of no-cost birth control?”

Answer 5: The National Women’s Law Center’s CoverHer hotline helps women who are having trouble getting access to birth control and other women’s health services at no cost to them. The user-friendly hotline provides personalized instructions on how to navigate the health insurance process to ensure women get the coverage they are guaranteed under the health care law and includes critical follow-up to track the results.

You can contact them at:

Website: www.CoverHer.org

Hotline number: 1-866-745-5487

Email: coverher@nwlc.org