

Women's Preventive Health Services in the Health Care Law: What Students Should Know

The health care law makes preventive care more accessible and affordable to millions of Americans by requiring all new plans to cover certain women's preventive health services and screenings without cost-sharing.ⁱ 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.ⁱⁱ

Student health plans must comply with the women's preventive services requirement and provide these critical health services for women without co-pays as of the new plan year on or after August 1, 2012. 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 a co-pay.

Does this mean I won't have to pay anything for these preventive services?

You will be able to get the included preventive services with no co-pay. You will not need to make a separate payment to your doctor or pharmacy.

What kind of contraception is covered?

The full range of FDA-approved contraceptive methods is included. This means a woman can access oral contraception (the pill), injectables, the ring, contraceptive implants, diaphragms, cervical caps, and non-surgical permanent contraceptives without paying a co-payment or having the costs applied to her deductible.* Sterilization for women is also covered with no co-pay or deductible.

Are there any student plans that do not have to comply?

- Health plans that existed before the health care law are considered "grandfathered" and do not have to follow the preventive services requirement. But it is unlikely that a student plan will be grandfathered. If a student first enrolled in the plan after March 23, 2010, then it should not be grandfathered.
- Self-funded student health plans – those administered by colleges and universities without third party insurers – do not have to comply with the preventive services requirement. It is estimated that there are approximately 200,000 students covered through self-funded student health plan arrangements.

When do these new requirements take effect?

New plans must cover the additional women's preventive services, including birth control, at the start of their plan year on or after August 1, 2012. Since many school health plans begin their yearly plan around the beginning of the school year, students should receive the women's preventive health services without cost-sharing this fall.

What about colleges and universities that object to covering contraception for students?

Colleges and universities with religious objections are not exempt from providing contraceptive coverage for their students. However, certain non-profit institutions of higher education with religious objections to covering contraception for students can obtain a one-year delay.ⁱⁱⁱ Qualifying schools are exempt from providing coverage only for *contraception* for one year; they still must provide coverage for the other women's preventive health services. These schools must notify students that they will not receive contraceptive coverage during this one year grace period.

What if I'm on my parent's plan, not on the student health plan? Will I still get access to the women's preventive services benefit?

The health care law allows adult children to stay on their parents' health plan to age 26. You will need to contact a plan representative to find out when the new plan year starts. Non-student plans often start their plan year on January 1, so you might not receive the benefits until January 1, 2013. You will also need to ask whether the plan is grandfathered. If it is, it does not need to comply with the women's preventive services requirement.

What about other preventive services not specific to women?

There are additional preventive services that all new health insurance plans already have to cover, many of which are particularly important for students. For more information on the other preventive services that are already required to be covered, see our factsheet *Women's Preventive Services in the Affordable Care Act: Frequently Asked Questions*.^{iv}

How do I find out if I'm covered?

The first step is to talk to your insurer. Please see our guide and flow chart, [_](#), for guidance on what questions to ask.

Who do I call if I think I'm being denied this coverage, have questions, or want to share my story?

If you think you have been wrongly denied coverage, you should contact whichever office enforces these laws in your state. This website will help you to identify the appropriate agency in your state:

Also, if you think you have been denied coverage, have questions, or want to share your story, please call the National Women's Law Center at 1-866-PILL4US or email us at pill4us@nwlc.org. Our experts are happy to help you in any way that we can.

For more information on contraceptive coverage, please visit www.nwlc.org/contraceptivecoverage.

* Insurance companies do have some flexibility in implementing this new requirement, like being able to charge a co-pay for a brand name drug where generic equivalents exist.

ⁱ Patient Protection and Affordable Care Act of 2010, Pub. L. No. 111-148, § 1001, 124 Stat. 119, 131 (2010) (to be codified at 42 U.S.C. § 300gg-13).

ⁱⁱ Coverage of Preventive Health Services, 47 CFR § 147.130 (2011), *and* Women's Preventive Services: Required Health Plan Coverage Guidelines (Aug. 1, 2011), <http://www.hrsa.gov/womensguidelines/>.

ⁱⁱⁱ Guidance on the Temporary Enforcement Safe Harbor for Certain Employers, Group Health Plan and Group Health Insurance Issuers with Respect to the Requirement to Cover Contraceptive Services Without Cost Sharing Under Section 2713 of the Public Health Service Act, Section 715(a)(1) of the Employee Retirement Income Security Act, and Section 9815(a)(1) of the Internal Revenue Code, *available at* <http://cciio.cms.gov/resources/files/Files2/02102012/20120210-Preventive-Services-Bulletin.pdf>.

^{iv} Nat'l Women's Law Ctr., Women's Preventive Services in the Affordable Care Act: Frequently Asked Questions (July 25, 2012), <http://www.nwlc.org/resource/women%E2%80%99s-preventive-services-affordable-care-act-frequently-asked-questions>.