



Washington State National Organization for Women

CONTRACEPTIVE EQUITY

Washington State National Organization for Women supports the requirement that any health care plan that covers prescriptions must include contraceptive coverage as part of that coverage.

Contraceptive coverage is important for the health of mothers, children and their families.

Maternal and infant health are greatly improved when women have access to contraception to prevent unintended pregnancies. Studies have shown that spacing children and limiting family size significantly improves the health of mothers and infants and increases the overall well being of families.ⁱ

Unintended pregnancies can also be traumatic to families. A woman with an unintended pregnancy is less likely to seek early prenatal care and is more likely to unknowingly expose the fetus to potentially harmful substances. A child of an unwanted pregnancy is at greater risk of being born at low birth weight, of being abused, of dying in the first year of life, and of being developmentally delayed.ⁱⁱ

Contraceptive coverage needs to be easily accessible to everyone in the state.

WA State NOW believes that any health care plan that covers prescription drugs must include contraceptive coverage as a part of that coverage. Individual insurance companies and corporate entities should not be allowed to opt out for any reason. In December 2000, the U.S. Equal Employment Opportunity Commission ruled that employers who do not provide prescriptive contraceptive coverage, but do cover other prescription benefits, are in violation of the Title VII of the Civil rights Acts of 1964.

Imposing barriers to contraception thwarts the very purpose of contraceptive equity legislation. Expanding rather than restricting access to contraception is essential if the goal is to improve the health of mothers and their families.

Contraceptive coverage is fair and widely supported by the public.

Two-thirds of the women in the United States, of childbearing age, rely on private, employer-related plans for their health coverage, yet 49% of large group plans do not routinely cover any contraceptive method.ⁱⁱⁱ

In Washington State fewer than one in three (30%) of large group plans cover the five FDA approved reversible methods of contraception.^{iv}

Women of childbearing age in the United States pay 68% more in out-of-pocket health care costs than men, largely due to reproductive health care services.

Seventy-five per cent of Americans favor legislation requiring insurance companies to cover contraception. Support for insurance coverage remains high (73%) even when participants are told that coverage could increase their insurance premiums.^v In fact, contraceptive coverage could be added to health plans for very little cost – as little as a \$1.43 a month per employee per year.^{vi}

Increasing access to contraceptive coverage makes economic sense.

Many health insurance plans cover prescription drugs but exclude prescription contraceptives. The lack of insurance coverage puts contraceptives beyond the financial reach of many women of childbearing age. In the absence of comprehensive coverage, many women opt for cheaper over the counter products that are more likely to fail.

Including contraception as part of insurance coverage would save insurers money.

Contraceptives cost less than services related to pregnancy. While a year's supply of birth control pills costs about \$325, the labor and delivery costs alone for childbirth without complications are more than \$5000. The cost of delivery through cesarean section is approximately \$10,000.

ⁱ The Washington State Council on Family Planning, Family Planning First – A Partnership for Responsible Parenting.

ⁱⁱ Institute of Medicine, The Best of Intentions: Unintended Pregnancy and the Well-Being of Children and Families, 1995.

ⁱⁱⁱ Center for Reproductive Law and Policy, Contraceptive Bills Gain Momentum in State Legislatures, August 1999.

^{iv} Washington State Insurance Commissioner, Reproductive Health Benefits Survey, 1998.

^v Kaiser Family Foundation poll, 1998.

^{vi} The Guttmacher Report, The Need for and Cost of Mandating Private Insurance Coverage for Contraception, August 1998.