Contraceptives and the Affordable Care Act

What is the contraceptive mandate under the ACA?

Under the Affordable Care Act (ACA), certain preventive health services and screenings, including birth control, are covered in all new health insurance plans without cost sharing.

What is “no cost sharing” contraception?

“No cost sharing” means that you will not be charged a co-payment for contraceptives and any service costs will not be applied to your deductible. For example, if you used to spend $5 a month on your birth control pill before the ACA, you will now pay no out of pocket costs for the pill under this mandate. Besides contraceptives, you can also access a wide range of other preventive services—mammograms, pap smears, and annual well-woman visits—without co-pays or deductibles.

Who’s covered under this mandate?

All women under new and “un-grandfathered” group and individual health plans have to conform to this mandate. Depending on the state in which they live, women on Medicaid may be able to access co-pay free contraceptives. If a woman lives in a state that did not expand Medicaid eligibility and access to no cost sharing contraceptives, they may not be able to access these benefits. Women employed by religiously affiliated non-profits will still be able to access no cost sharing contraceptives—a third-party provider will step up and provide these contraceptive services for faith-based non-profits who object to this coverage.

How many women will benefit from this?

Contraceptive use is widespread—according to a 2010 CDC study, more than 99% of women between 15-44 years old have ever used at least one contraceptive method. About 10.7 million women say they currently use oral contraceptives, like the pill. Expanded access to no cost sharing contraceptives should increase the number of women who can access birth control methods.

Which contraceptives are covered under the ACA?

The ACA covers 20 contraceptives—the full range of Food and Drug Administration (FDA)-approved contraceptives—that all prevent fertilization, including birth control pills, patches, rings, shots, cervical caps, contraceptive implants, diaphragms, intrauterine devices (IUDs), emergency contraception, and permanent contraceptive methods.
So besides preventing pregnancy, what else can these contraceptives do? What other health benefits should I know about?

Plenty of women take birth control for noncontraceptive uses. Hormonal birth control is routinely prescribed to control menstrual pain and treat diagnoses like endometriosis and polycystic ovarian syndrome (PCOS). Women who take the pill for at least one year are 40 percent less likely to develop uterine or endometrial and ovarian cancers as well as having protection against pelvic inflammatory disease, a cause of infertility.

I’m under 18—can I still get emergency contraceptives under this mandate?

As of June 10, 2013, the FDA has approved over-the-counter access to Plan B One-Step for all women who could potentially become pregnant, regardless of age. However, generic versions will only be available to women 17 years and older.

I’m covered under a grandfathered insurance plan—what about my access to contraceptives?

The ACA has a provision for grandfathered plans, allowing them to maintain their current coverage if they do not make changes to their carriers, benefits, or charges. If they want to make changes, they will lose their grandfathered status and fall in line with the ACA’s mandates. This should impact 90 percent of large U.S. companies, who expect to lose their grandfathered status by 2014. It’s important to note that most plans already cover the no cost sharing preventive services required under the ACA. If your current grandfathered plan already provides access to these services, you can continue to receive these health benefits without any modifications.

What’s the economic impact of the mandate?

According to the Assistant Secretary for Planning and Evaluation of Department of Health and Human Services (DHHS), “providing contraceptive coverage as part of a health insurance benefit does not add to the cost of providing insurance coverage.” In fact, contraceptive coverage is actually a money-saving mandate. While direct costs add approximately 0.5 percent to the premium costs of each adult enrollee in a company’s insurance plan, the indirect benefits of this inclusion are massive. With reduced time off work and productivity loss, employers gain more time back from their employees, saving an estimated $97 per year per employee. According to Planned Parenthood, women will save up to $600 annually under the mandate.

Where can I find more information about the ACA’s contraceptive mandate?
For more information about how you’ll be impacted by the ACA’s contraceptive mandate, check out the National Women’s Law Center. State-level information can be accessed from the National Conference of State Legislatures.

Learn more about NOW’s stance on reproductive rights.


2. Contraceptives are not synonymous with abortifacients, though many right-wing and faith-based organizations conflate the two. The speculation that the birth control pill and similar methods are “chemical abortions” has not been observed in clinical settings; contraceptive scientists have been able to clinically substantiate that birth control drugs and devices prevent fertilization.


