$Selected\ State\ Legislation\ /\ Executive\ Actions\ to$ Increase Information About and Access to Contraception (through the end of 2016) 1,2

Legislation to Extend the Supply of Prescription Contraceptives			
State	Bill	Outcome	
Alaska	<u>SB156</u>	Failed (adjourned)	
	<u>HB345</u>	Failed (adjourned)	
California	<u>SB999</u>	Became Law	
Colorado	<u>HB16-1322</u>	Passed House / Failed in Senate	
D.C.	<u>B21-0020</u>	Became Law	
Hawaii	<u>SB2319</u> / <u>HB1895</u>	Became Law	
Illinois	HB5576 (part of updated contraceptive		
	equity law)	Became Law	
Iowa	SF2160 (formerly Senate Study Bill 3036)	Failed (adjourned)	
Maryland	<u>HB1005</u> (part of contraceptive equity bill)	Became Law	
Minnesota	<u>HF2606</u>	Failed (adjourned)	
New Jersey*	<u>AS2297</u> / <u>S659</u>	Pending	
Oregon	<u>HB3343</u>	Became Law	
Rhode Island	<u>HB5706</u>	Failed	
Vermont	Act 120 (part of larger bill)	Became Law	
Virginia	<u>HB592</u>	Failed	
	<u>SB404</u>	Failed	
Wisconsin	<u>AB932 / SB724</u>	Failed (adjourned)	

Legislation to Increase Access to Contraceptives Through Pharmacy Access ³			
State	Bill	Outcome	
Alaska	<u>S169</u>	Failed (adjourned)	
California	Chapter 469	Became Law	
D.C.	<u>21-707</u>	Failed (adjourned)	
Hawaii	<u>HB1896</u> / <u>SB2320</u>	Failed	
Illinois	<u>HB5809</u>	Failed (adjourned)	
Iowa	<u>SB2222</u> (formerly SSB 3082)	Passed Senate / Failed in House	
Massachusetts	<u>HB2041</u>	Failed (adjourned)	
Missouri	<u>HB1679</u>	Failed (adjourned)	
	<u>A2296</u> / <u>SB1073</u>	Pending	
		Pending (S2060 merged w/	
NT T 4	<u>A2480</u> / <u>S2060</u>	S1073)	
New Jersey*	<u>SB1303</u>	Pending	
	<u>AB2942</u>	Pending	
	<u>AB4030</u>	Pending	
	<u>SB6811</u>	Failed (adjourned)	
New York	<u>A8707</u> / <u>SB7503</u>	Failed (adjourned)	
Ohio	<u>HB285</u>	Became Law ³	
Oregon	<u>Chapter 649</u>	Became Law	
South Carolina	<u>HB4644</u>	Failed (adjourned)	
Tennessee	<u>HB1847</u> / <u>SB1958</u>	Failed	

	<u>HB1723</u>	Failed—withdrawn
	Public Chapter No. 942	Became Law
	<u>HB2681</u>	Became Law
Washington	<u>SB6467</u>	Failed (adjourned)
Wisconsin	<u>AB968</u>	Failed (adjourned)

Legislation that Goes Beyond the ACA's Contraceptive Coverage Provision			
State Bill Outcome			
Alaska	<u>HB345</u>	Failed (adjourned)	
Illinois	<u>Public Act 99-062</u>	Became Law	
Maryland	Chapter 437	Became Law	
Massachusetts	<u>HB948</u>	Failed (adjourned)	
	<u>SB483</u>	Failed (adjourned)	
New York		Passed Assembly / Failed in	
	<u>A08135B</u> / <u>S06013</u>	Senate (adjourned)	
Vermont	<u>Act 120</u>	Became Law	

Legislation to Educate College Students About Unplanned Pregnancy			
State	Bill	Bill Description	Outcome
Arkansas	Act 943	Required the Higher Ed. Coordinating Board to	Became Law
		develop an action plan to address the prevention	
		of unplanned pregnancy (effective 7/1/15).	
	SB2563	Required Commissioner of Higher Ed. & E.D. of	Became Law
		the Community College Board to develop a plan	
		of action to address the prevention of unplanned	
		pregnancy (effective 7/1/2014). The state	
		appropriated \$250,000 so community colleges	
		could implement the plans they had developed for	
		the 2015-2016 academic year.	
Mississippi	Governor's	Would have provided \$500,000 for FY17 to	Failed
	<u>budget</u>	continue to support the initiative. While the	
	proposal	budget request failed, the state identified other	
		funds. The Department of Human Services	
		provided \$250,000 in available Temporary	
		Assistance for Needy Families (TANF) funds to	
		the Mississippi Community College Board to	
		allocate to community colleges in 2017.	

Other Legislation / Policies to Increase Access to Birth Control			
State	Bill		Outcome
Arkansas	Act 246	Appropriations for the Dept. of Health (DoH) allow the transfer of up to \$3.7 million in carry forward funds to be used in FY17 at the discretion of the director to carry out two initiatives, one of which is to provide long-acting reversible contraceptives (LARC) through	Passed

		complete marridad by the Dell of 111141.	
		services provided by the DoH at local health units.	
Colorado	<u>HB16-</u> <u>1405</u>	The budget approved for FY16–17 includes an additional \$2.5 million for the Department of Health and Environment for its existing family planning budget.	Became Law
Delaware	Executive Action / Public- Private Partnership	The state received over \$10 million in private funding, and reallocated \$1.75 million in funds from the Division of Public Health to bolster the project.	Ongoing—did not require legislative approval
Florida	HB947 / SB1116	Would have required the DoH to establish a LARC pilot program in Hillsborough, Palm Beach, and Pinellas Counties; contract with family planning providers to implement the pilot program; and apply for grants for additional funding.	Failed
Kansas	<u>H2586</u>	Would have required the Dept. of Health and Environment to enter into contracts with eligible family planning providers for the provision of LARC services, and provided general support, marketing, and outreach assistance to expand capacity.	Failed
Mississippi	<u>HB158</u>	Would have allowed Medicaid enrolled hospital providers to be reimbursed for immediate postpartum LARC, among other things. The bill did not pass, but this provision was included in the Medicaid appropriations bill (see below).	Failed
	<u>HB1650</u>	Directs the Division of Medicaid to provide reimbursement to Medicaid enrolled hospital providers for immediate postpartum LARC insertion at the time of delivery.	Became Law— Guidance here
Missouri	<u>H2775</u>	Would have allowed a health care provider to transfer a LARC to a patient other than the patient for whom it was initially prescribed, in certain circumstances.	Failed (adjourned)
New Hampshire	Executive Council	The Governor and Executive Council voted to authorize the Maternal & Child Health Section, Family Planning Program to enter into retroactive agreements with vendors to provide family planning services in an amount not to exceed \$638,000 from the state general funds (effective 7/1/15-6/30/17).	Passed
Ohio	<u>S332</u>	Relates to the Commission on Infant Mortality. Among other provisions, requires the development and implementation of curricula in medical, nursing, and physician asst. programs to prepare select providers to provide patient counseling on efficacy-based contraceptives, including LARC. It also provides grants for	Became Law

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		technical assistance to Federally Qualified Health Centers (FQHCs) and FQHC lookalikes interested in promoting awareness and use of LARC; provides for access to LARC at freestanding birthing centers and hospitals; and allows separate Medicaid reimbursement for postpartum LARC.	
Texas	HB1	FY16-17 budget rider (see pg11-132) stipulates that Dept. of State Health Services implement program policies to increase access to LARC, and develop provider education and training to increase access to the most effective forms of contraception, including vasectomy (effective on 9/1/15).	Became Law
Vermont	Act 120	Part of a broader law, it directs the Dept. of Vermont Health Access to establish and implement value-based payments to health care providers for insertion and removal of LARC and appropriates funds to increase the reimbursement rates.	Became Law
Washington	<u>S5806</u>	Would have required the state health care authority to assure that the total Medicaid rate paid for the provision of LARC methods is at least equivalent to the total rate paid for the services required to provide oral contraceptives.	Failed (adjourned)
Virginia	Governor's budget proposal	Included \$6 million for FY17 and \$3 million for FY18 to increase federal support for the education and expanded access for women's reproductive health. Specifically, it would have removed barriers to the availability of LARC.	Failed
Wyoming	<u>S84</u>	Would have required contraception information and services provided by DoH to include access to LARC including injections, intrauterine devices, and implants.	Failed

^{*} Legislation from New Jersey's 2016 legislative session carries over to 2017, the second year of their current legislative session.

¹ The majority of the policy actions captured here are from 2016; a few are from prior years. See http://thenationalcampaign.org/resource/key-state-policies-glance for brief descriptions of these policies.

 $^{^2}$ See http://thenationalcampaign.org/resource/briefly-state-policies-increase-information-about-and-access-contraception for more details on the policies that are in place.

³ This bill does not allow pharmacists to prescribe. Rather it authorizes pharmacists to convert prescriptions authorizing refills under certain circumstances, including for contraception. It is much narrower in scope than the bills passed in CA, OR, and TN.