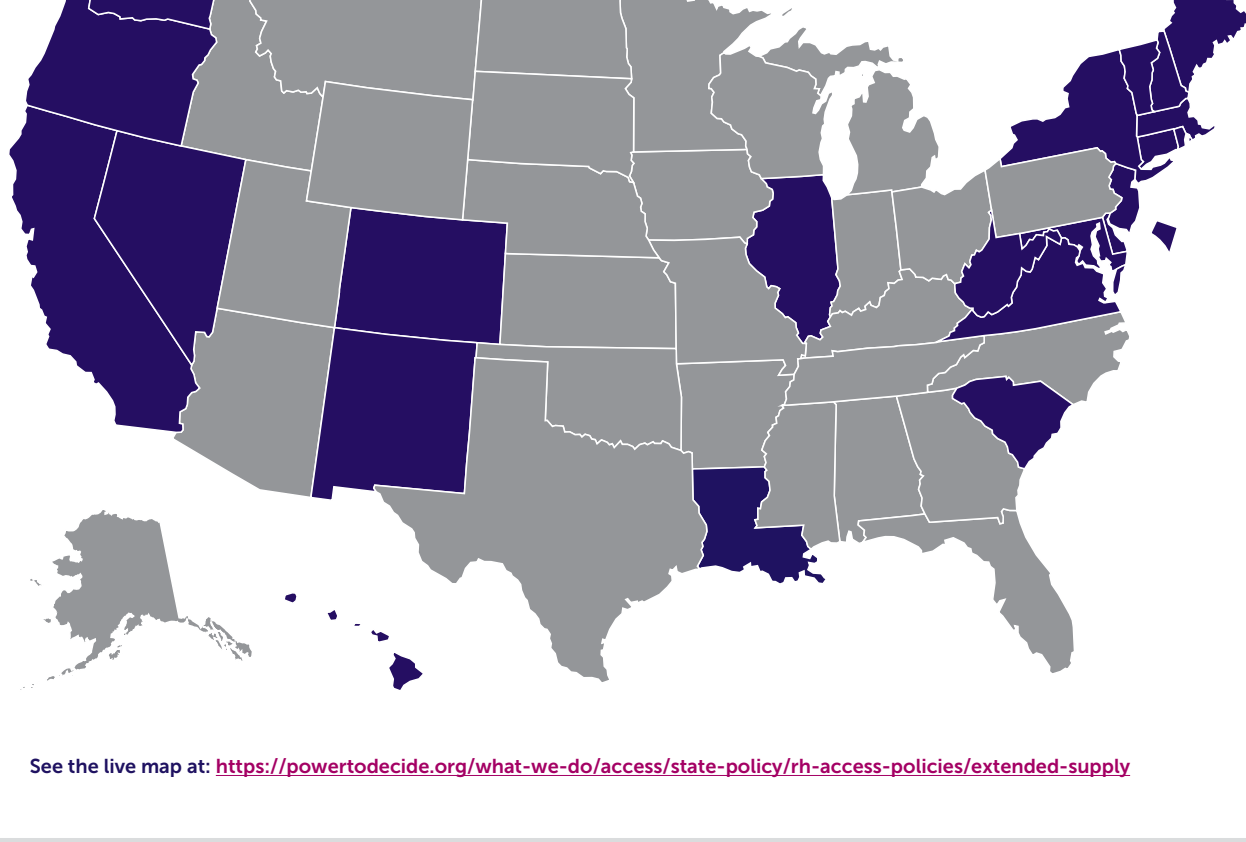


COVERAGE FOR AN EXTENDED SUPPLY OF PRESCRIPTION CONTRACEPTION

As of August 12, 2022

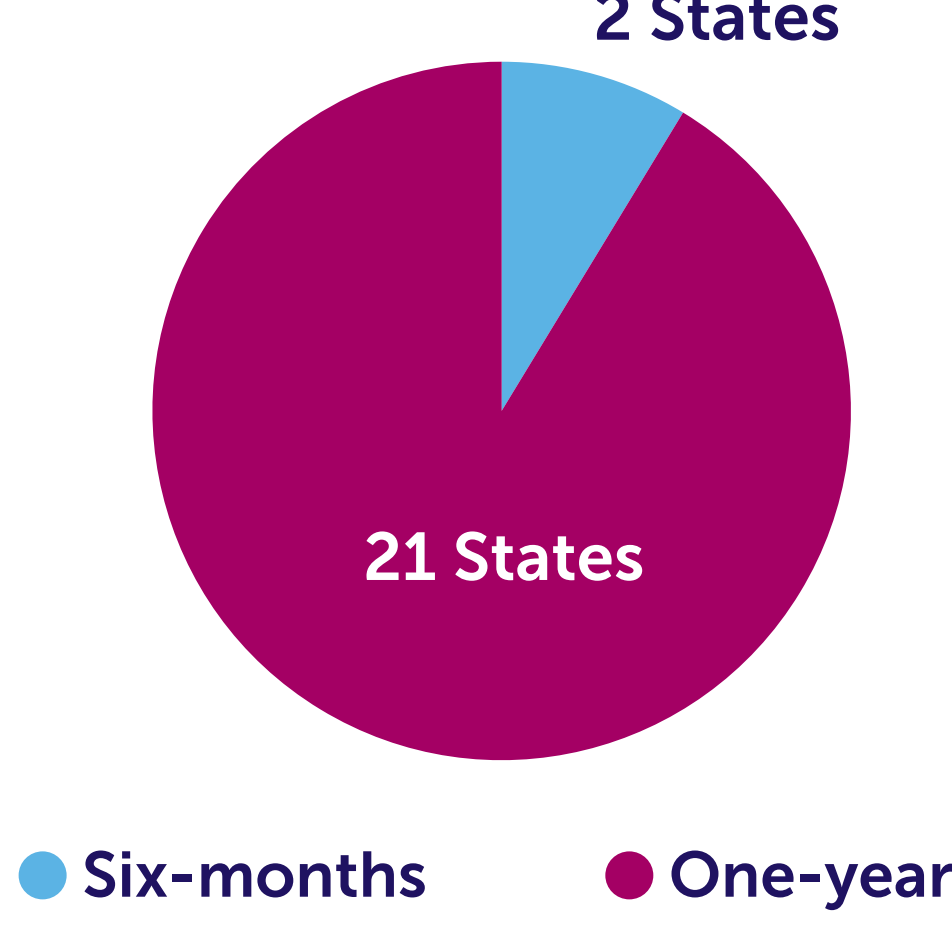
23 States including DC, require certain health insurance plans to cover an extended supply of prescription contraceptives



See the live map at: <https://powertodecide.org/what-we-do/access/state-policy/rh-access-policies/extended-supply>

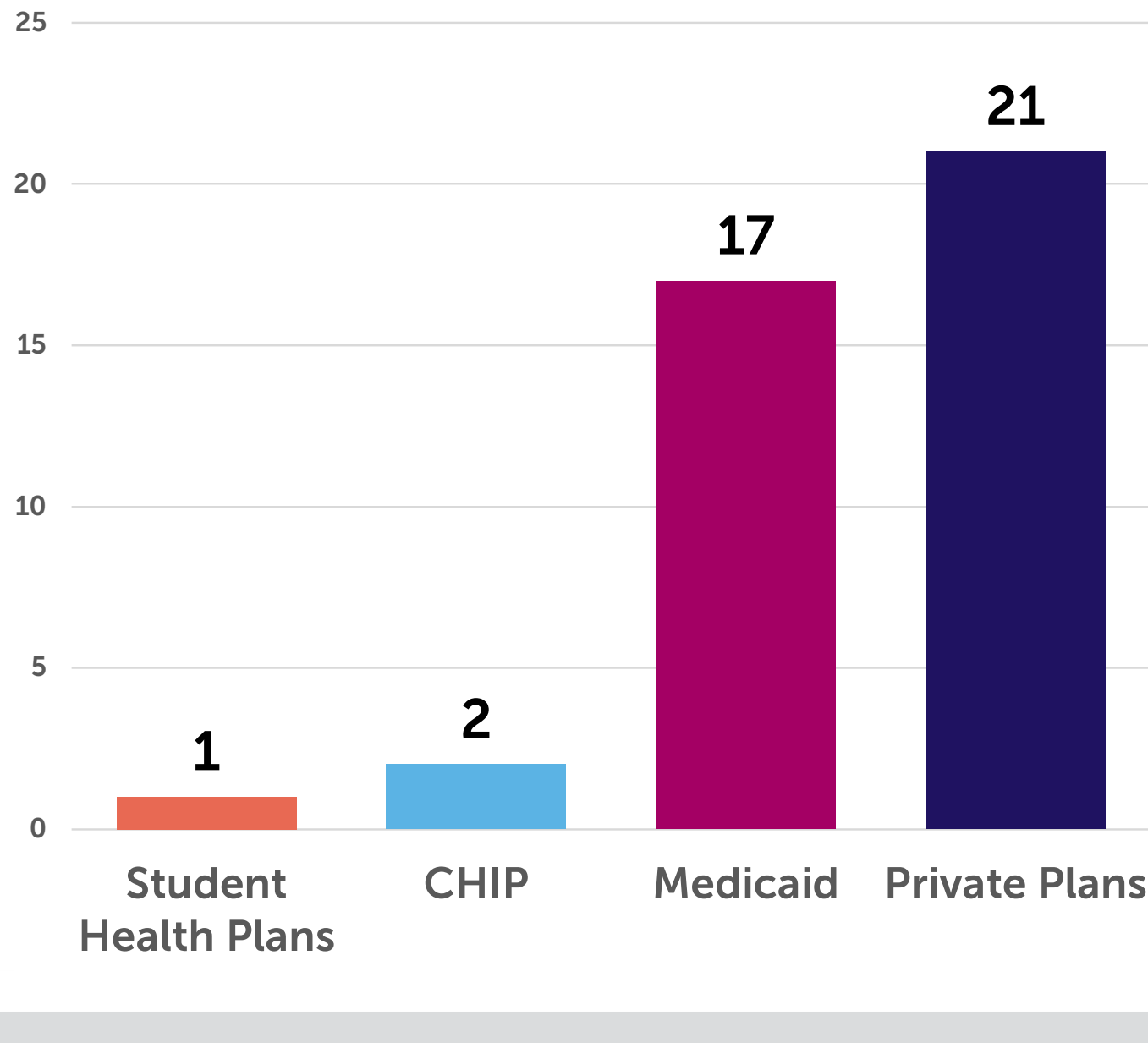
Length of Extended Supply Requirement, by Number of Months

Insurance plans typically cover 30-to 90-day supplies of prescription contraceptives at one time, but extended supply laws institute a six or 12-month coverage requirement.



Number of States Requiring Coverage of an Extended Supply, by Plan Type

This requirement typically does not apply to all types of plans in the state. Most commonly, it has been applied to private plans, followed by Medicaid. A few states also extend the requirement to the Children's Health Insurance Plan (CHIP) and student health plans.



"I'm still hopeful that one day we can do a year supply for BC. It is challenging to continue to argue with the pharmacy who argues with the insurance companies about when I can pick up my medication."

- Mary K., 29, from Atlanta, GA

Restrictions



Similar to most insurance mandates, these modest proposals have had some push back from insurers.

6 The number of states that have a requirement that the insured person first receive a smaller supply of the contraceptive before receiving an extended supply.

Benefits

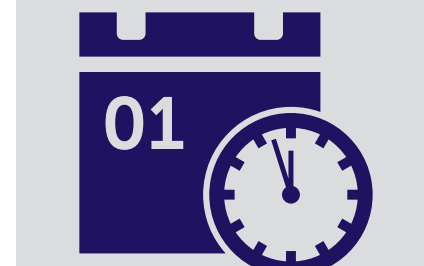
Studies suggest a 12-month supply has been associated with fewer gaps in contraceptive access, fewer unintended pregnancies, and cost savings.¹



43% of women given a 3 month supply of contraceptives experience at least 1 gap of at least 7 days between refills during 1 year of use



A 12-month supply of pills could result in annual savings for the Veterans Administration health system of \$87.12 per woman compared to cost of 3-month option, or an estimated total of \$2,117,800



1 year supply associated with 30% reduction in odds of having unplanned pregnancy compared to dispensing 1 or 3 month supply

Increasing Access During COVID-19:

The pandemic has laid bare the need for convenient access to contraception and providing an extended supply of contraceptives is one way to do so. Obtaining a 12-month supply of contraceptives at one time allows people to stay home to reduce exposure to the coronavirus. Additionally, as millions of individuals lose their jobs and their health insurance, having an extended supply can help avoid gaps in access.

Barriers to Realizing the Benefits of Extended Supply

Although a critical mass of states have passed and implemented this law, some anecdotal evidence indicates that it is not always so easy for consumers to access in practice. This can be due to a number of factors:

- Lack of public awareness campaigns.
- Lack of awareness among pharmacy staff filling scripts.²
- Insurers wrongfully denying claims.³
- Institution-wide default prescription length settings in electronic medical records.⁴

Monitoring and Enforcement: NY State Case Study

Requiring insurers to cover an extended supply of contraceptives at one time, for those who want it, is a smart choice that many states have acted on. However, passing a law is only the first step. Robust implementation of these laws is also key to their success; engaging providers, pharmacists, and insurers can help reduce unnecessary barriers for patients. Monitoring and enforcement also matter. For instance, advocates in New York were pivotal in elevating the issue of non-compliance with this policy among some insurers.

In April 2020, New York Attorney General Letitia James released a statement demanding that three health insurance companies immediately comply with the Comprehensive Contraception Coverage Act and provide coverage for 12-month supply of contraceptives. Each company also received a letter outlining the importance of extended supply of contraceptives. In addition, Attorney General James set up a helpline for individuals to report health insurance plans or pharmacies who wrongfully deny this care.⁵

For more info, see: <https://powertodecide.org/what-we-do/information/resource-library/extended-supply-contraception>

1. Power to Decide <https://powertodecide.org/what-we-do/information/resource-library/extended-supply-contraception>
2. Nikpour G, Allen A, Rafie S, Sim M, Ribble R, Chen A. Pharmacy Implementation of a New Law Allowing Year-Long Hormonal Contraception Supplies. *Pharmacy (Basel)*. 2020 Sep 6;8(3):165. doi: 10.3390/pharmacy8030165. PMID: 32899924; PMCID: PMC7560217.
3. James, Letitia. (2020, April 19). Attorney General James demands health insurance providers obey the law, protect women's access to birth control [Press release]. Retrieved from <https://ag.ny.gov/press-release/2020/attorney-general-james-demands-health-insurance-providers-obey-law-protect-womens>.
4. Uhm S, Chen MJ, Cutler ED, Creinin MD. Twelve-month prescribing of contraceptive pill, patch, and ring before and after a standardized electronic medical record order change. *Contraception*. 2021 Jan;103(1):60-63. doi: 10.1016/j.contraception.2020.10.011. Epub 2020 Oct 21. PMID: 33098853; PMCID: PMC7736567.
5. James, Letitia. (2020, April 19). Attorney General James demands health insurance providers obey the law, protect women's access to birth control [Press release]. Retrieved from <https://ag.ny.gov/press-release/2020/attorney-general-james-demands-health-insurance-providers-obey-law-protect-womens>.