

**TESTIMONY IN SUPPORT OF H7255:
RELATING TO INSURANCE- ACCIDENT & SICKNESS INSURANCE POLICIES**

TO: House Committee on Health & Human Services
From: Kelly Nevins, CEO, Women's Fund of Rhode Island
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Women's Fund of Rhode Island (WFRI) is pleased to submit testimony in support of H7255, requiring health insurers in Rhode Island to provide coverage for all FDA-approved contraceptive products, procedures, and services, or their therapeutic equivalents as defined by the FDA. The bill requires coverage of over the counter contraceptives without prescription and a full year supply for Medicaid recipients. It codifies the current protections provided by the Affordable Care Act (ACA).

This provision in the ACA has already led to:

1. Decreasing Unintended Pregnancies

The unintended pregnancy rate for poor women is more than five times the rate for women in the highest income bracket. Women of all ages are more likely to choose and continue using highly effective contraceptive methods when these methods and their accompanying services (including patient education and counseling) are provided without cost. Removing cost as a barrier to contraception reduces unintended pregnancies.

2. Better Economic Outcomes

The financial impact of unintended pregnancies and subsequent births can be significant, particularly for low-income women. Unplanned pregnancies are five times more likely for those at or below the federal poverty level, according to data from the Guttmacher Institute, a nonprofit that provides research and policy analysis of sexual and reproductive topics.

The decision to have a child is one of the greatest economic decisions a woman will make in her lifetime. Research shows that women who are able to choose whether and when to have children attain higher education rates, increased earning power, and a narrowing of the gender gap in pay. The benefit allows users not to have to choose between paying for birth control and paying for other necessities, such as groceries or the heating bill. This makes it easier to plan whether and when to have children.

3. Healthier Outcomes for Women and Planned Children

Unintended and teenage pregnancies are associated with delayed prenatal care, fetal exposure to tobacco and alcohol, and poorer health outcomes for newborns.

Since the enactment of the Affordable Care Act in 2010, more than 2,000 legal challenges have been filed in state and federal courts contesting part or all of the ACA.³ In response, in 2024 the Rhode Island General Assembly codified in state law the ACA's protections for no-cost share preventive services. This was critically important to

preserve affordable access to contraception.

It is also important to update the state's stand-alone contraception coverage mandate in order to ensure access to all FDA-approved methods, limit insurer restrictions, and to ensure that the no-cost provision for over-the-counter contraception, and alternative therapies for those who need them, are more readily accessible.

Before the ACA's birth control benefit went into effect, contraception accounted for 30% to 44% of women's out-of-pocket health care costs. We won't go back to an era where women paid more for health care simply because of their gender. Preventive reproductive care — including birth control — is basic health care.

Women's Fund of Rhode Island respectfully urges a favorable report on H7255, Relating to Health Insurance-Accident & Sickness Insurance Policies, in support of better economic and healthier outcomes for women and their planned children.

The mission of the Women's Fund of Rhode Island is to invest in women and girls through advocacy, research, and strategic partnership designed to achieve gender equity through systemic change. Our [Women's Well-Being Index](#) compares how well women fare against men on topics related to health, safety, economic security, education, and civic participation in every RI city/town. Our [policy briefs](#) are written in response to the data found on the Index. You can find more about our work at www.wfri.org.