

**TESTIMONY IN SUPPORT OF H6047:
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 H6047, which would require RI health insurers to provide coverage for all FDA-approved contraceptive drugs, devices, and other products; voluntary sterilization procedures; patient education and counseling on contraception; and follow-up services. It would also ensure Medicaid recipients receive a twelve-month supply of contraceptives.

By expanding health coverage and access to birth control to millions, the Affordable Care Act (ACA) has been a game changer for women's health and economic security. Access to contraceptives plays a critical role in improving health outcomes, empowering people to plan their futures, and advancing economic equity. The ACA provision requiring contraceptive coverage without cost-sharing mitigated a major barrier to contraceptive use: cost.

The benefits of comprehensive contraceptive access are well-documented:

- **Decreased Unintended Pregnancies:** Removing cost barriers significantly reduces unintended pregnancies, particularly among low-income populations, by making highly effective methods more accessible.
- **Better Economic Outcomes:** The ability to choose whether and when to have children directly correlates with higher educational attainment, greater earning potential, and a narrowing gender wage gap.
- **Improved Health Outcomes:** Planned pregnancies are associated with better maternal and child health outcomes, including earlier prenatal care and reduced risk of adverse birth outcomes.

Birth control use is nearly universal: **99% of sexually active women** have used birth control at some point in their lives. It is not controversial; it is basic health care.

Updating Rhode Island's law is essential to:

- Require insurance coverage for **all FDA-approved** contraceptive drugs, devices, and other products;
- Cover **voluntary sterilization, comprehensive contraceptive counseling, and related services** such as device insertion and removal;
- **Strictly limit insurer restrictions** and delays that could hinder timely access;
- Require **coverage of alternative therapeutic options** if the FDA-approved option is not tolerated or is medically inadvisable for the patient;
- Ensure **over-the-counter contraceptives** are covered **without a prescription**;

- Provide **Medicaid recipients a 12-month supply** of contraceptives, reducing barriers to consistent use.

Since the ACA's passage, over 2,000 legal challenges have threatened the protections it offers. In 2024, Rhode Island took an important step by codifying the ACA's preventive service protections into state law. Passing H6047 is the next necessary measure to reinforce these protections, especially as federal uncertainties continue.

Before the ACA, contraception accounted for 30% to 44% of women's out-of-pocket healthcare costs. We must not return to a time when women paid more for healthcare simply because of their gender.

Safeguarding no-copay birth control is not just a health issue—it is an economic issue and a matter of equality. Preventive reproductive care, including access to the full range of contraceptive options, must remain affordable and accessible to all.

For these reasons, the Women's Fund of Rhode Island respectfully urges you to support **H6047**.

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.