

Dear Chair Abney and honorable members of the House Committee on Finance,

My name is Elizabeth Doss, I am from Providence. I am a third-year medical student at the Warren Alpert Medical School of Brown University.

I am testifying in support of House Bill 7323 (Rep. Alzate). This bill updates the existing Rhode Island state law mandating coverage of contraception enacted in 2000 in order to ensure access to all FDA-approved methods, limit insurer restrictions, require coverage of contraception-related services, and ensure no-cost sharing coverage for FDA-approved over-the-counter contraception.

Working at Women & Infants Hospital, I have had the opportunity to meet many young women who need to adjust their family planning due to the cost of birth control. Access to contraceptives plays a critical role in improving health outcomes and economic security. In 2023 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. But we can, and must, go farther to ensure everyone in our state can get the birth control they need.

It's essential to update the existing Rhode Island state law that mandates coverage of contraception enacted in 2000 to:

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- Require insurance coverage of all FDA-approved contraceptive drugs, devices, and other products; voluntary sterilization; comprehensive
- contraceptive counseling; and other related services including device insertion and removal;
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- Strictly limit the ability of insurers to impose restrictions and delays;
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- Require insurers to cover, under the existing no-cost-share provision, alternative therapeutic options if the covered option in the insured's
- plan is not tolerated by the patient or is medically inadvisable.
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- Require coverage of over the counter contraceptives without a prescription; and
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- Ensure Medicaid coverage for a twelve (12) month supply of contraceptives.
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We know this will work; studies show that contraceptive coverage requirements lower out-of-pocket costs, improve contraception use and adherence, and increase utilization of long-acting reversible contraceptives (LARCs), some of the most effective forms of pregnancy prevention. Every person should have access to health care to decide if, when, and how they have children and build their families. All those women who came into the clinic seeking low-cost birth control should have access to it.

I strongly support passing House Bill 7323 to safeguard no-copay birth control, building on a critical ACA health insurance benefit, in our state law. Preventive reproductive care — including birth control — is basic health care and everyone needs access to the contraceptive method that is right for their life. This is not just a health issue, it's an economic issue.

Thank you for your time and consideration.

Elizabeth Doss

104 Hope St Fl 2, Providence RI 02906



Elizabeth Doss

Pronouns: she/her

M.D. Candidate, Class of 2028

Warren Alpert Medical School of Brown University

B.S. Neuroscience | Brown University '24