The Honorable Jack Reed Chairman Senate Armed Services Committee 228 Russell Senate Building Washington, DC 20510 The Honorable Adam Smith Ranking Member House Armed Services Committee 2216 Rayburn House Office Building Washington, DC 20515

## Dear Chairman Reed and Ranking Member Smith:

As organizations committed to protecting and improving access to health care, we write to urge you to include language in the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2025 that would ensure that all service members and their dependents who rely on the military for health care have improved access to comprehensive contraceptive coverage and care without cost sharing. Reproductive freedom, including using birth control, allows people to make decisions about their health, lives, and futures that are best for them. But making meaningful decisions about our reproductive lives requires access to the full spectrum of reproductive health care.

People need coverage of all birth control methods without out-of-pocket costs so that they can use the specific birth control that is right for them without cost being an obstacle. Unfortunately, certain service members and military family dependents currently face out-of-pocket costs for their contraceptive care. Although the Affordable Care Act (ACA) guarantees that employer-sponsored and marketplace health plans cover preventive services without cost sharing, including all Food and Drug Administration (FDA)-approved, -granted, or-cleared contraceptives, counseling, and education, these protections do not extend to TRICARE. Due to this disparity, non-active duty service members and military family dependents covered by TRICARE must still pay co-pays depending on where they obtain their contraception and care. The House-passed FY 2023 and 2024 NDAA bills included a key provision that would remove cost sharing for birth control obtained through the mail-order pharmacy and the TRICARE retail pharmacy program, as well as eliminate out-of-pocket costs related to contraceptive counseling and services, ensuring that cost is no longer a barrier for people who seek such care. This provision has been introduced this Congress as part of the Access to Contraception for Servicemembers and Dependents Act. We strongly urge you to ensure this provision is included and passed in the final NDAA text.

Overall, access to birth control has vast public support, with 84 percent of voters saying that everyone should have access to the birth control they want or need, when they want or need it,

without any barriers standing in their way. Even small copays can be prohibitive for some people. Studies show that the costs related to contraception, even when small, lead some people to forgo it completely, to choose less effective methods, or to use it inconsistently. Since the ACA went into effect, more people have chosen to use more effective long-acting, reversible contraceptive methods, and more people are using shorter-term contraceptive methods more consistently.

Black, Indigenous, and people of color and LGBTQ+ people already face substantial barriers in accessing health care, including systemic and deeply ingrained racism in the health care system and discrimination by providers because of a patient's actual or perceived sexual orientation or gender identity. These barriers are compounded by financial hurdles such as co-pays on preventive health services including birth control. This provision would eliminate these unjust financial barriers and allow all TRICARE beneficiaries to more easily make decisions about contraception, which provides myriad health benefits and empowers one to determine when and how to create a family.

This provision would help ensure that service members and dependents receive the high-quality contraceptive care they deserve. Access to abortion and contraception are both critical to the fundamental freedom to make the most personal decisions about our bodies, families, lives, and futures. This freedom has never been under greater threat. Thank you for your support for reproductive health care and we urge you to do all you can to protect and expand access for service members and their loved ones.

Sincerely,

Advocates for Youth

American Civil Liberties Union

American College of Nurse-Midwives

American College of Obstetricians and Gynecologists

American Humanist Association

American Medical Student Association

American Society for Reproductive Medicine

Association of Maternal & Child Health Programs

Catholics for Choice

Center for Biological Diversity

Center for Reproductive Rights

Contraceptive Access Initiative

**Endocrine Society** 

**Guttmacher Institute** 

Hadassah, The Women's Zionist Organization of America

Ibis Reproductive Health

In Our Own Voice: National Black Women's Reproductive Justice Agenda

**Ipas** 

Iraq and Afghanistan Veterans of America

Jacobs Institute of Women's Health

Jewish War Veterans of the USA

Jewish Women International

Medical Students for Choice

Minority Veterans of America

National Association of Nurse Practitioners in Women's Health

National Council of Jewish Women

National Family Planning & Reproductive Health Association

National Health Law Program

National Institute for Reproductive Health

National Network to End Domestic Violence

National Organization for Women

National Organization for Women Foundation

National Partnership for Women & Families

National Women's Health Network

National Women's Law Center

Network for Victim Recovery of DC (NVRDC)

Nurses for Sexual and Reproductive Health

Physicians for Reproductive Health

Planned Parenthood Federation of America

Population Connection Action Fund

Population Institute

Power to Decide

Protect Our Defenders

Religious Coalition for Reproductive Choice

Reproductive Freedom for All

Reproductive Health Access Project

RH Impact

Service Women's Action Network

SIECUS: Sex Ed for Social Change

Society for Adolescent Health and Medicine

Society for Maternal-Fetal Medicine

Union for Reform Judaism

Upstream USA

Women of Reform Judaism

<sup>1</sup> Polling on file with the National Women's Law Center.

<sup>&</sup>lt;sup>2</sup> NWLC, Trump-Pence Actions Gut the ACA Birth Control Benefit, Threatening Women's Health and Economic Security (Oct. 2018), https://bit.ly/3eCQ2Rl.

<sup>&</sup>lt;sup>3</sup> Ashley H. Snyder et al., The Impact of the Affordable Care Act on Contraceptive Use and Costs Among Privately Insured Women, 28-3 WOMEN'S HEALTH ISSUES 219 (2018), <a href="https://bit.ly/3t9f1RT">https://bit.ly/3t9f1RT</a>. Lydia E. Pace et al., Early Impact of the Affordable Care Act on Oral Contraceptive Cost Sharing, Discontinuation, and Nonadherence, 35(9) HEALTH AFFAIRS 1616 (2016), <a href="https://bit.ly/3dZEWXL">https://bit.ly/3dZEWXL</a>.