

Signed into law in May 2016, the Vermont Access to Birth Control law is one of the most comprehensive birth control access laws in the country. **What does the Vermont Access to Birth Control law do?**



Codifies the Affordable Care Act's (ACA) birth control benefit for Vermonters, ensuring no-cost birth control. Enacted federally in 2010, the ACA stipulates that private health insurance plans must offer birth control and other preventive services without co-pays or deductibles. So if you have insurance, you should have access to free birth control.¹ By codifying this benefit, Vermont is guaranteeing people with health insurance will continue to have free access to birth control regardless of any federal changes to the ACA.



Extends the no-cost birth control benefit to vasectomies. The ACA does not include vasectomies in the birth control benefit, but beginning in October 2016 in accordance with the Access to Birth Control law, Vermonters with insurance seeking a vasectomy should be able to access the procedure with no-copay and have it not count toward their deductible.



Provides access to one year's supply of prescription birth control. Previously, many insurance plans had 30, 60, or 90 day limits on the prescription, dispensing, and reimbursement of birth control pills, patches, or the ring, requiring women to frequently contact their providers or insurers for prescription refills, and make multiple trips to the pharmacy. Under the new law, a patient can receive 12 months of birth control pills, patches, or the ring in one visit to their health care provider.



Recognizes pregnancy as a "qualifying event" on the health exchange. Now uninsured women in Vermont who become pregnant do not have to wait for an 'open-enrollment' period to enroll in the health exchange - they can do so immediately.



Improves access to long acting reversible contraception (LARC) by increasing Medicaid provider reimbursement. There are several barriers to patients being able to access an IUD or implant, including the high cost to providers to offer LARC. Increasing the reimbursement rate will encourage more Medicaid providers to offer the full range of birth control options and increase access for patients.

Prior to 2016, only California had codified the ACA Birth Control Benefit, and now Vermont and Maryland join the list. Vermont and Maryland are the first states to extend the benefit to vasectomies. Vermont is the second state to pass 12-month dispensing, after Oregon in 2014, and the only state to increase LARC reimbursement legislatively.

¹ More information about the Affordable Care Act's birth control benefit is available at <https://www.healthcare.gov/coverage/birth-control-benefits/>