



LB 20 : REDUCING UNINTENDED PREGNANCY by Ensuring Barrier-Free Access to Birth Control

Health insurance plans typically cover 30- to 90-day supplies of prescription birth control at one time. Limiting the supply of prescription contraceptives to these short intervals reduces timely access to birth control and can create gaps in use. By providing for extended coverage of contraceptives, we can support a family's ability to determine when and if they would like to have children.

LB 20 will reduce interruptions in birth control, helping to reduce unintended pregnancy and abortion in Nebraska

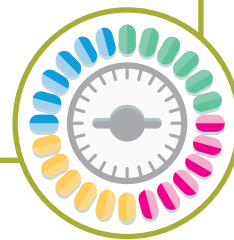
LB 20:

- Requires that public and private insurers cover the quantity of contraceptives dispensed in accordance with the prescription—up to 12 months of contraceptives at a time.
- Does not require a 12-month supply on the first prescription under private insurance.
- Does not require providers to prescribe an extended supply of contraception at one time—only that insurers cover the quantity of contraceptives dispensed in accordance with the prescription.

Research and Results:

- The Centers for Disease Control (CDC) finds that “the more pill packs given up to 13 cycles, the higher the continuation rates. Restricting the number of pill packs distributed or prescribed can result in unwanted discontinuation of the method and increased risk for pregnancy.”²
- The Veterans Affairs (VA) health system estimates that the adoption of a 12-month dispensing option is expected to produce substantial cost savings while reducing unintended pregnancy among women veterans³ with an anticipated annual cost savings of \$87.12 per woman, an estimated total savings of over \$2 million annually and 583 unintended pregnancies prevented each year.
- 21 states and DC have enacted policies requiring insurers to increase the number of months for which they cover prescription contraceptives at one time—usually up to a 12-month supply.⁴

A study found that a 12-month supply of birth control **decreased unplanned pregnancies by 30%**, compared with a supply of just one or three months, and **reduced the likelihood of an abortion by 46%.**¹



¹ Diana Greene Foster, Denis Hulett, Mary Bradsberry, Philip Darney, Michael Policar, “Number of oral contraceptive pill packages dispensed and subsequent unintended pregnancies,” *Obstetrics & Gynecology*, March 2011, Volume 117, Issue 3, p. 566-572, <https://pubmed.ncbi.nlm.nih.gov/21343759/>.

² The Centers for Disease Control, “U.S. Selected Practice Recommendations for Contraceptive Use, 2016,” <https://www.cdc.gov/mmwr/volumes/65/rr/rr6504a1.htm>.

³ Colleen P Judge-Golden, Kenneth J Smith, Maria K Mor, Sonya Borrero, “Financial Implications of 12-Month Dispensing of Oral Contraceptive Pills in the Veterans Affairs Health Care System,” *JAMA Intern Med.* 2019;179(9):1201-1208, <https://jamanetwork.com/article.aspx?doi=10.1001/jamainternmed.2019.1678>.

⁴ Power to Decide, “At a Glance: Coverage for an Extended Supply of Contraception,” March 2020, <https://powertodecide.org/what-we-do/information/resource-library/extended-supply-contraception>.

LB 20 aligns with the Women's Fund values of: **Bodily Autonomy** and **Bold Impact**.
To learn more about our mission, vision and values visit www.OmahaWomensFund.org.

