The Affordability is Access Act

Research is clear—access to safe and affordable contraception is fundamental to a person’s ability to determine when to start a family, manage health conditions and make decisions about their own bodies and lives. Despite the fact that the pill is one of the safest and most effective forms of birth control, nearly one in three individuals continue to face barriers when trying to access contraception.

Prescription requirements for daily oral contraceptives pose significant barriers for many women, particularly women without access to transportation, affordable childcare, health insurance coverage or a regular doctor.

Research has shown that making the pill over the counter (OTC) and available for zero out of pocket costs would help women have more control over their sexual and reproductive health, including when and if to start a family and greatly reduce the number of unplanned pregnancies.

The Affordability Is Access Act would ensure that people have access to daily over-the-counter birth control without a prescription and out-of-pocket costs. Specifically, the bill would:

- **Require coverage of over-the-counter contraception, which would include a daily over-the-counter pill if one were to come on the market.** All private health insurance plans are now required to cover all U.S. Food and Drug Administration (FDA)-approved methods of contraception. However, existing guidance allows insurers to impose a prescription requirement to get coverage of any over-the-counter contraception method. This bill would require coverage of all over-the-counter birth control without requiring a prescription, including any over-the-counter contraception that the FDA approves for routine, daily use.

- **Maintain the FDA’s sole authority to determine the safety and efficacy of drugs and make them available over-the-counter without a prescription.** As with other types of medicine, the entities that research and develop oral contraceptives, and whose medical and scientific experts have developed clinical and other evidence that birth control pills are safe and effective for women when sold without a prescription, must apply to the FDA for review and approval for sale without a prescription.
  - Upon the receipt of such an application, the FDA must determine whether the contraceptive product meets the rigorous safety and efficacy standards for over-the-counter use, as established by the agency Federal Food, Drug, and Cosmetic Act. If the product meets these standards, the FDA should approve the application without delay.

- **Ensure Retailers Provide Oral Contraception without a Prescription.** The Act states that any retailer that stocks oral contraception that the FDA has approved or regulated for routine, daily use without a prescription may not interfere with a consumer’s access to or purchase of such contraception.
State of Contraception Access: National

- There are 66 million women of reproductive age living in the United States.
- An estimated 10.6 million women, including low-income women, women of color, young women and immigrant women, do not have insurance coverage.
- Insurance companies are required by law to cover contraceptives at no cost to patients -- but a prescription is needed.
- Nearly 1 in 3 women face barriers in getting a prescription for birth control.
- 19.5 million live in “contraception deserts” or meaning they lack reasonable access to a health center or provider that offers a full array of contraceptive methods.

State of Contraception Access: Massachusetts

- 1 in 3 people use hormonal birth control (e.g., pill, shot, or patch)
- The pill is the most common form of birth control used across the state
- Nearly half of all pregnancies are unplanned

Endorsed by National Women’s Law Center (NWLC), Center for Reproductive Rights (CRR), National Latina Institute for Reproductive Health (NLIRH), In Our Own Voice, National Asian Pacific American Women’s Forum (NAPAWF), National Partnership for Women & Families (NPWF), National Family Planning and Reproductive Health Association (NFPRHA), NARAL, Planned Parenthood, Guttmacher Institute, American College of Obstetricians and Gynecologists (ACOG), American Civil Liberties Union (ACLU), Physicians for Reproductive Health, and Power to Decide.