

Connecticut Commission on  
Women, Children *and* Seniors



Testimony of  
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Commission on Women, Children and Seniors  
Insurance and Real Estate Committee

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**Re: S.B. 586, AN ACT REQUIRING HEALTH INSURANCE COVERAGE FOR PREVENTIVE CARE PROVIDED TO FEMALE ENROLLEES AND ACCESS TO PRESCRIPTION CONTRACEPTION METHODS; S.B. 494, AN ACT CONCERNING HEALTH INSURANCE COST-SHARING REQUIREMENTS FOR PRESCRIPTION CONTRACEPTION; and S.B. 585, AN ACT REQUIRING HEALTH INSURANCE FOR BREAST PUMPS AND PROTECTIONS AFFORDED TO WOMEN BREASTFEEDING IN PLACES OF EMPLOYMENT.**

Senators Larson and Kelly, Representative Scanlon, and distinguished members of the Insurance and Real Estate Committee, thank you for the opportunity to provide testimony on behalf of the Commission on Women, Children and Seniors in reference to three bills of importance to CWCS. As staff to the legislature, CWCS researches best practices, coordinates stakeholders, and promotes public policies that are in the best interest of Connecticut's underserved and underrepresented women, children and older adults.

When the Affordable Care Act was enacted, women throughout Connecticut praised the many provisions it provided which reduced gender-based inequities in access to – and cost of – healthcare.

Now that the ACA is imperiled, many of these lifesaving provisions are at risk. And their being at risk puts women at risk.

**S.B. 586, An Act Requiring Health Insurance Coverage for Preventive Care Provided to Female Enrollees and Access to Prescription Contraception Methods**

Specifically, women may soon have to pay out-of-pocket for such essential services as Pap smears and HPV tests, which screen for cervical cancer – the second most common cancer in the world affecting women. While the average cost of these tests is about \$50, when doctor's office visit fees are added, they can routinely cost up to \$200. And, if third-party laboratory contractors are used, as is often the case, these procedures can run as much as \$1,000, which is of growing concern to the American Congress of Obstetricians and Gynecologists (ACOG), as reported in U.S. News & World Report.<sup>1</sup>

**S.B. 494, AAC Health Insurance Cost-Sharing Requirements for Prescription Contraception**

Another casualty of the ACA's pending repeal is a woman's birth control benefit. Before the ACA went into effect, many women routinely spent between 30 and 44% of their out-of-pocket healthcare costs on pregnancy prevention.<sup>2</sup> Currently, the ACA requires health insurance plans to

cover all FDA-approved contraceptives without any cost to the patient, which has decreased unwanted pregnancies (and therefore, abortions), and has been of enormous value in protecting the finances – and the peace of mind – of many Connecticut women.

### **S.B. 585, An Act Requiring Health Insurance for Breast Pumps and Protections Afforded to Women Breastfeeding in Places of Employment**

The CWCS believes that women who choose to breastfeed after giving birth should have access to affordable breastfeeding supports such as hospital-grade breast pumps, which typically have stronger motors and do a better job at maintaining a woman's milk supply than inferior brands do. This is especially important for new mothers dealing with a low milk supply or in cases where a baby has a medical condition that prevents it from breastfeeding soon after being born.

Lactation and breastfeeding, which medical practitioners consider part of the course of childbirth, are a legitimate expense that should be covered by insurance. Increasing access to breast pumps is of particular importance to new mothers who go back to work. Without affordable options, new mothers may be more likely to stop breastfeeding sooner than they would if they had a high-quality breast pump. CWCS supports measures that would increase women's choices by making expensive breastfeeding equipment more affordable.

<sup>1</sup> <http://health.usnews.com/health-news/news/articles/2013/10/16/how-a-routine-pap-smear-ends-up-costing-1000>

<sup>2</sup> Source: Planned Parenthood of Southern New England