

Health and Human Services Forms Panel to Explore Contraceptive Devices as Preventative Care

As Congress continues to debate the merits of the Patient Protection and Accountability Act, a particular issue has begun to quietly heat up: should health plans be required to cover services for women's reproductive health? The Obama administration is exploring whether health plans can and should be required under the health reform law to offer contraceptives and other family planning services free of charge. For employer plans, this may mean having to cover contraceptives at 100% without any member copayment, coinsurance, or deductible.

At the request of the Department of Health and Human Services (HHS), a panel of scientific experts from the Institute of Medicine (IOM) is debating what services should be considered preventive care for women, and thereby covered at no cost to patients as required under the preventive care aspect of the reform law. As expected, controversy has arisen over whether birth control should fall into that category. The panel's third and final open meeting to take testimony was in early March.

It is likely that health plans may not incur much additional cost for mandated contraceptive coverage in and of itself, but it could become a significant issue in relation to total costs incurred for all preventive services. Plus, mandated coverage of contraceptives may end up among the aggregate of costly new benefit mandates being evaluated by the IOM panel.

Last July, HHS issued an interim final rule which requires "new" plans starting on or after September 23, 2010, to provide dozens of preventive and wellness services at no cost to enrollees.

As this issue continues to unfold, Conner Strong will continue to provide updates. Should you have any questions, please contact your Conner Strong account representative toll-free at 1-877-861-3220.



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