March 18, 2021 The Honorable Julia Brownley United States House of Representatives 2262 Rayburn House Office Building Washington, DC 20515

Dear Congresswoman Brownley:

As organizations that support full access to reproductive health care for veterans, we write in support of the Equal Access to Contraception for Veterans Act. This bill would ensure that veterans have access to no-copay contraception much like their civilian counterparts. During the unprecedented COVID-19 crisis, improving access to essential care such as contraception has become increasingly urgent and necessary. Therefore, we call on Congress to pass this commonsense legislation without delay.

Contraception and the ability to determine if and when to have children are inextricably tied to one's wellbeing, equality, and ability to determine the course of one's life. Under the Affordable Care Act (ACA), group and individual plans must cover all FDA-approved female-controlled birth control methods and related education or counseling without cost-sharing. However, the ACA does not extend to VA care, and veterans covered by the VA must still pay a co-pay for their contraception. Your bill would remove the cost-sharing barrier to contraception obtained through the VA, much like the coverage required through employer-based insurance plans. We hope to continue to work with you and the VA to pass and implement this provision, as well as take necessary action to ensure people accessing birth control through the VA do not face cost barriers for counseling or services associated with contraception.

Women comprise approximately 10% of the total veteran community and are the fastest growing cohort within that community; the percentage of women veterans is expected to grow by more than half in the next twenty years. Within that group, women of reproductive age between ages 18-44 are the fastest growing subset of new VA users. Further, research estimates that the veteran community includes more than 11,000 trans men, in addition to non-binary veterans and veterans who identify with a different gender, many of whom use contraception. Moreover, female veterans are more likely to live in poverty than male veterans, and, similarly, trans veterans are more likely to live in poverty than their cisgender peers. Small copays can be prohibitive for veterans struggling to make ends meet. Studies show that the costs associated with contraception, even when small, lead some women to forgo it completely, to choose less effective methods, or to use it inconsistently.

¹ Nat'l Ctr. for Veterans Analysis and Statistics, U.S. Dep't of Veterans Affairs, The Past, Present and Future of Women Veterans 10 (2017), available at https://www.va.gov/vetdata/docs/SpecialReports/Women_Veterans_2015_Final.pdf.

² Sarah A. Friedman et al., *New women Veterans in the VHA: a longitudinal profile*. 21 Women's Health Issues 103, 103-11 (2011) available at https://pubmed.ncbi.nlm.nih.gov/21724129/.

³ Gary J. Gates & Jody L. Herman, Transgender Military Service in the United States, The Williams Institute (2014), https://williamsinstitute.law.ucla.edu/wp-content/uploads/Trans-Military-Service-US-May-2014.pdf.

⁴ Guttmacher Inst., Evidence You Can Use: Insurance Coverage of Contraception (2020) *available at* https://www.guttmacher.org/evidence-you-can-use/insurance-coverage-contraception.

⁵ See, e.g., Guttmacher Inst., A Real-Time Look at the Impact of the Recession on Women's Family Planning and Pregnancy Decisions 5 (2009), http://www.guttmacher.org/pubs/RecessionFP.pdf.

People with the capacity for pregnancy have served in every U.S. military conflict since the American Revolution. Your legislation would help ensure that veterans receive the high-quality health care they deserve, including by expanding access during the devastating global pandemic. Thank you again for your outstanding leadership and support for veterans' health.

Sincerely,

American Academy of Nursing

American College of Nurse-Midwives

American College of Obstetricians and Gynecologists

American Society for Reproductive Medicine (ASRM)

Black Mamas Matter Alliance

Catholics for Choice

Center for Reproductive Rights

Endocrine Society

Guttmacher Institute

Ibis Reproductive Health

In Our Own Voice: National Black Women's Reproductive Justice Agenda

Ipas

Jacobs Institute of Women's Health

Medical Students for Choice

NARAL Pro-Choice America

National Association of Nurse Practitioners in Women's Health

National Birth Equity Collaborative

National Center for Lesbian Rights

National Council of Jewish Women

National Family Planning & Reproductive Health Association

National Health Law Program

National Organization for Women

National Partnership for Women & Families

National Women's Health Network

National Women's Law Center

Nurses for Sexual and Reproductive Health

People For the American Way

Physicians for Reproductive Health

Planned Parenthood Federation of America

Population Connection Action Fund

Power to Decide

Religious Coalition for Reproductive Choice

Reproductive Health Access Project

Service Women's Action Network

Society for Maternal-Fetal Medicine

Union for Reform Judaism

Women of Reform Judaism