

KEY FACTS ON BIRTH CONTROL COVERAGE BENEFIT

FACT: Majority of Americans and Catholics support the birth control benefit. A Public Religion Research Institute (released 2/7/12) shows that 58 percent of Catholics believe that employers should be required to provide their employees with health care plans that cover contraception. A Public Policy Poll (released 2/7/12) shows that 57 percent of voters believe women employed by Catholic hospitals and universities should have the same rights to contraceptive coverage as other women.

FACT: Birth control use is nearly universal in the United States, even among Catholic women. 99 percent of all sexually experienced women and 98 percent of sexually experienced Catholic women will have used birth control at some point in their lives.

FACT: The current policy already includes an expansive exemption, allowing approximately 335,000 churches/houses of worship to refuse to provide birth control for their employees.

MYTHS and ATTACKS on the BIRTH CONTROL COVERAGE BENEFIT AND THE REAL FACTS

As birth control opponents continue their attack on women's birth control coverage benefit, they are resorting to spreading inaccurate information and using misleading rhetoric. Below please find the real facts about the birth control coverage benefit, and the religious exemptions.

MYTH: Birth control opponents are trying to "twist the facts" and wrongly claim that this benefit would cover abortifacients and abortion inducing drugs.

FACT: This benefit in no way requires coverage of abortifacients. The requirement is that health plans must cover all FDA approved prescription contraceptive methods. Contraception is not abortion. Birth control opponents wrongly claim that Plan B is an abortifacient, when the FDA says it is a form of birth control, since it cannot and does not induce an abortion. Opponents of contraception repeatedly try to switch the debate to abortion, in order to inflame the rhetoric. That's just inaccurate. [FDA, Plan B Q& A, [8/24/06](#)]

MYTH: Catholic voters oppose this benefit, since it intrudes on their religious freedom.

FACT: This benefit is popular with majority of Americans, including majority of Catholics. A poll by Public Religion Research Institute shows that 58 percent of Catholics believe that employers should be required to provide their employees with health care plans that cover contraception. Another poll by Public Policy Polling shows 56 percent of voters support the birth control coverage benefit, including 53 percent of Catholic voters, and 62 percent of Catholics who identify themselves as independents. This should come as no surprise, since 98% of sexually experienced Catholic women will have used birth control at some point in their lives.

MYTH: This benefit is a government mandate gone too far.

FACT: A 53 percent majority of Catholics agree that women employed by Catholic hospitals and universities should have the same rights to contraceptive coverage as other women. 57 percent of all voters think that women employed by Catholic hospitals and universities should have the same rights to contraceptive coverage as other women.¹

¹ http://www.plannedparenthood.org/files/PPFA/PPP_Polling_Memo_on_Birth_Control_Benefit_020712.pdf

The reality is that this benefit is consistent with current policy, including existing federal refusal laws (almost none of which capture birth control), and the laws in the states. In fact, 28 states already have laws requiring contraception be covered by health insurance, and there is not any controversy about that. Of the 28 states with contraceptive equity laws, eight don't have a refusal provision at all.² More importantly, only eight states have laws on the books that require contraceptive equity but also could go so far as to allow religiously-affiliated hospitals to refuse to comply with these coverage requirements.³

MYTH: This is a violation of religious freedom and the First Amendment.

FACT: Courts have ruled that virtually identical exclusions in state contraceptive equity laws do not violate the First Amendment or substantially burden a religious belief or practice. For example, the New York Court of Appeals (the highest court in the state) explained, “when a religious organization chooses to hire nonbelievers it must, at least to some degree, be prepared to accept neutral regulations imposed to protect those employees’ legitimate interests in doing what their own beliefs permit.” *Catholic Charities of Albany v. Serio*, 859 N.E.2d 459, 468 (N.Y. 2006).

Birth control opponents also ignore the religious freedom of the individual worker, and their right to make their own health care decisions. This provision does not require any religiously affiliated institution to provide birth control. This about health insurance coverage, which is one step removed.

MYTH: There is no religious exemption.

FACT: The current benefit includes an expansive religious exemption, allowing 335,000 churches and houses of worships to refuse to provide this benefit their employees, even if they don't share the same faith (such as a janitor or secretary). Expanding the refusal provision would mean that religiously affiliated hospitals and universities that operate as a business and serve and employ the broader public would be allowed to deny their employees access to this common benefit. Millions of American workers would lose access to this critical benefit under such an expansion.

MYTH: This benefit is forcing religiously affiliated hospitals and universities to do something they currently aren't doing.

FACT: As [NPR reported](#), many Catholic hospitals, such as Catholic Healthcare West and universities currently provide birth control coverage to their employees. It is a standard and expected benefit, even for employees at Catholic hospitals and universities.

MYTH: Opponents of the birth control coverage benefit are only interested in expanding the refusal provision for religiously-affiliated entities.

FACT: The same organizations that are pushing for an expanded refusal provision have actually pushed for the entire birth control coverage benefit to be repealed. For example, the

² CO, GA, IA, MT, NH, VT, WA, and WI

³ CT, DE, HI, MD, MO, NM, WV. Note the IL contraceptive equity does not contain a refusal provision; however, the Health Care Right of Conscience Act allows a “health care payer” to refuse to pay for or arrange for the payment for health care services that it objects to. At the same time, there are no religiously-affiliated health plans in IL so health plans in IL do comply with the contraceptive equity law.

bulk of the United States Conference of Catholic Bishops' comments on the birth control coverage regulation focused on demanding that birth control not be considered a women's preventive benefit.

MYTH: Birth control is not basic health care for women.

FACT: The Institute of Medicine (IOM) considers birth control an essential part of women's health care. For this reason, major medical societies, including the American Congress of Obstetricians and Gynecologists (ACOG), the American Academy of Pediatrics, the American Nurses Association, the Society of Gynecologic Oncology, and the Ovarian Cancer National Alliance, oppose an expansion of the refusal provision.

Because it is such basic health care, excluding birth control from coverage has long been considered discrimination against women. Prescription contraceptives are used exclusively by women, who uniquely have the potential to become pregnant. The failure to provide coverage for prescription contraception in health plans that otherwise cover prescription drugs and devices singles out and treats less favorably medication needed for a pregnancy-related condition. It is for this reason that the EEOC has recognized the denying women contraceptive coverage constitutes sex discrimination. [Decision on Coverage of Contraception, Equal Employment Opportunity Committee (Dec. 14, 2000).]