Family Planning, Birth Control, and Abortion Coverage

Your health plan includes coverage for family planning, birth control (including emergency birth control), abortion, and abortion care. Your plan covers medication, supplies, and services approved by the U.S. Food and Drug Administration (FDA). In some cases, your coverage is available with no cost-share. This means you don't pay out-of-pocket costs like deductibles or copays.

Specifically, your plan covers birth control medication and supplies that:

- Last for a 12-month period. It's your choice whether to get it all at once or at many times throughout the year.
- Are available over-the-counter (without a prescription). Examples are condoms and sponges.
- You can get from a licensed pharmacist with a prescription. Examples are birth control pills, the patch, and the ring.

Your plan also covers birth control counseling, procedures, and family planning services. These include:

- Voluntary sterilization (such as having your tubes tied or a vasectomy).
- Counseling about birth control choices.
- Follow-up care about medication, supplies, products, and services such as help managing side effects.
- Counseling about how to use the birth control method you've chosen the right way.
- Conversations with a pharmacist about medication questions.

You also have coverage for abortion and abortion care services. Services may include:

- Medication abortion drugs approved by the FDA.
- Clinical services for abortion like consultations, exams, procedures, patient education, referrals, and counseling.

In addition, here are some important things to know about your coverage and benefits:

Your health plan covers the cost of *male* condoms and sterilization and *female* birth control medication, sterilization, devices, products, and services without any cost-sharing requirements. However, if you participate in a high-deductible health plan (HDHP), you will have to pay part of the cost for these items. Federal tax laws require that HDHP members share in the cost.

Your health plan may require you to use a generic prescription medication to get coverage. This means if your doctor writes you a prescription for a brand name medication, your pharmacist may offer you a generic instead so your health plan covers the cost. There is a process in place that allows you to get medically

necessary coverage of a covered brand name medication, device, product, or service if your doctor calls for it or when there is no generic substitute available. Call Customer Service to learn more.

Also, your plan covers FDA-approved birth control medications. You have the right to get the medication or product your doctor prescribes you – or its therapeutic equivalent. (This is a product with a different name but that does the same thing.) If your doctor doesn't want you to use an equivalent, Cigna Healthcare® must cover another option.

Want more information or have questions about your birth control coverage?

Call the number on your ID card. Customer Service is available to help you 24/7/365. For TRS or TTY services, dial 711. We offer interpreter services at no cost to you.