

#### **Sexual and reproductive health of women in the US military** Issue brief 2: Insurance coverage of sexual and reproductive health care

#### BACKGROUND 🍃

Women play an integral role in the US military, comprising 15% of the activeduty force and 19% of the Reserve and Guard.1 Servicewomen face unique challenges when it comes to accessing contraception and abortion services, especially during deployment when these services may be limited. Furthermore, policies prohibiting or discouraging sexual activity may prevent women from seeking the care to which they are entitled. Unintended pregnancy and access to reproductive health services are not only public health and reproductive justice concerns, but also impact troop readiness, deployment, and military health care costs.

Ibis Reproductive Health launched a program of work in 2010 to fill the gaps in knowledge about US servicewomen's sexual and reproductive health needs and experiences. As part of this work, we analyzed military insurance coverage of women's and men's reproductive health services through TRICARE,<sup>2,3</sup> the health insurance program for servicemembers and their families, and compared it to the 2017 Blue Cross and Blue Shield (BCBS) standard nationwide health insurance plan offered to civilian federal employees under the Federal Employees Health Benefits Program (FEHB).<sup>4</sup> In this brief, we detail this review and provide a chart with sideby-side comparisons of coverage under the two plans.

#### COMPARING THE BENEFITS: TRICARE VERSUS A FEDERAL EMPLOYEE HEALTH PLAN

#### ABORTION

- TRICARE, by federal law (US Code § 1093), is not permitted to cover abortion except when the pregnancy endangers a woman's life or is a result of rape or incest.<sup>5</sup> The exception for rape and incest was added in January 2013 with the passage of the Shaheen Amendment in the National Defense Authorization Act.<sup>6</sup>
- BCBS, by a separate federal law, is not permitted to cover abortion for civilian federal employees except when the pregnancy endangers a woman's life or is a result of rape or incest.<sup>7</sup>

#### CONTRACEPTION

- TRICARE covers a range of contraceptive methods, including oral contraceptive pills, patches, rings, injectables, implants, diaphragms, cervical caps, surgical sterilization, intrauterine devices (IUDs), and emergency contraception (EC).
  - Over-the-counter (OTC) spermicide, male condoms, and female condoms are not covered.
  - In 2013, a mandate was issued requiring that Plan-B One-Step®, an OTC levonorgestrel-based EC product, be stocked at all military treatment facilities (MTFs) and available without a prescription at no cost.<sup>8</sup> Ulipristal acetate (ella®), a prescription EC product, is also covered by TRICARE, though not required to be stocked at every MTF.<sup>3</sup>
- TRICARE's Basic Core Formulary, a list of medications required to be readily available at all MTFs, includes several oral contraceptive formulations and Plan B One-Step® EC or an equivalent generic. Availability of other covered contraceptive methods is dependent upon individual MTFs' decisions to stock them.
- BCBS offers similar contraceptive benefits, including coverage of oral contraceptive pills, patches, rings, injectables, prescription EC, diaphragms, implants, IUDs, and sterilization.
  - OTC methods for women, including OTC EC, female condoms, spermicides, and sponges, are covered if one gets a prescription. Male condoms are not covered.
- Neither TRICARE nor BCBS covers reversal of surgical sterilization.

# OTHER PREGNANCY-RELATED SERVICES

- TRICARE and BCBS both cover an array of prenatal, delivery, and postpartum services, including medically necessary cesarean sections.
- TRICARE and BCBS both cover diagnosis and treatment for infertility; however, BCBS does not cover assisted reproductive technology (ART) procedures, such as artificial insemination or invitro fertilization (IVF). TRICARE covers some ART procedures for servicemembers whose reproductive abilities were injured while on active duty. In January 2016, the Department of Defense announced it will launch a pilot program covering freezing of eggs and sperm.<sup>9</sup>
- TRICARE covers breast pumps for all pregnant women and those who plan to breastfeed a legally adopted infant. BCBS covers breast pumps for all women who are pregnant and/or nursing.

#### SEXUAL DYSFUNCTION

- TRICARE provides comprehensive coverage of erectile dysfunction treatment, including external vacuum appliances, penile implants, testicular prostheses, hormone injections, and prescription drugs.
- BCBS covers only penile implants; injections and prescription drugs are not covered under the pharmacy benefit but may be purchased through a discount drug program (discounts vary by drug but average about 20%).
- Neither TRICARE nor BCBS cover treatment of sexual dysfunction besides erectile dysfunction.

#### SEXUALLY TRANSMITTED INFECTION (STI) SCREENING AND TREATMENT

• TRICARE and BCBS both cover screening and treatment for STIs.

### DISCUSSION >

The passage of the Shaheen Amendment in January 2013, which established abortion coverage for pregnancies that result from rape and incest, was a significant step forward for servicewomen, making military health coverage consistent with insurance for civilian federal employees. However, most servicewomen with an unintended pregnancy still cannot access abortion with their insurance, despite the disproportionately high rate of unintended pregnancy in the military.<sup>10</sup> TRICARE's abortion coverage is more restrictive than many private insurance plans, which cover abortion in a broader range of circumstances,<sup>11</sup> and is unique in the context of TRICARE's otherwise comprehensive pregnancy-related health package.

Additionally, this review sheds light on gender inequalities in health coverage in the military. While the range of services covered by TRICARE is more extensive for women than for men, men's sexual and reproductive health needs are met more comprehensively. In addition to the lack of abortion coverage, evaluation and management of women's sexual dysfunction is not a covered benefit whereas TRICARE covers male erectile dysfunction treatment.

This review also highlights the disparity between TRICARE and BCBS coverage of OTC contraception, including female condoms and spermicide, which are excluded under TRICARE but covered under BCBS if a prescription is obtained. The 2013 mandate that all MTFs stock and provide Plan B One-Step® at no cost and without a prescription is an important step toward ensuring servicemembers have access to a broader range of contraceptives. Some military branches or facilities may also choose to expand coverage beyond what TRICARE includes, such as covering condoms via OTC medication programs that allow servicemembers to access common non-prescription products at military pharmacies without cost.<sup>12</sup> For example, before the 2013 mandate that all MTFs stock Plan B One-Step®,8 the product was already covered at no cost at Navy pharmacies for servicewomen<sup>13</sup> and some Army military treatment facilities had similar programs.14 Condoms may also be made available without charge at the discretion of MTFs.<sup>12,15</sup>

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COMPARING THE BENEFITS: TRICARE VERSUS A FEDERAL EMPLOYEE HEALTH PLAN			
Services covered		TRICARE	BCBS Federal Employee Health Plan*
Abortion		✓ (when life of the woman is at risk or the pregnancy is a result of rape or incest)	✓ (when life of the woman is at risk or the pregnancy is a result of rape or incest)
Contraception	Cervical caps and diaphragms	$\checkmark$	✓
	Condoms		✓ (female condoms only, prescription required)
	Emergency contraceptives	✓ (Plan B One-Step® EC, without prescription; ella® EC, prescription required)	✓ (prescription required)
	Implantable contraceptives	$\checkmark$	✓
	Injectable contraceptives	$\checkmark$	✓
	IUDs	$\checkmark$	✓
	Oral contraceptives	$\checkmark$	$\checkmark$
	Patches	$\checkmark$	$\checkmark$
	Rings	$\checkmark$	$\checkmark$
	Spermicides		✓ (prescription required)
	Sterilization	$\checkmark$	$\checkmark$
	Surgical sterilization reversal		
Pregnancy-related services	Prenatal care	$\checkmark$	$\checkmark$
	Delivery care (including medically necessary cesarean section)	$\checkmark$	$\checkmark$
	Postpartum care	$\checkmark$	✓
	Infertility treatment	$\checkmark$	$\checkmark$
		(diagnosis and treatment)	(diagnosis and treatment)
	Assisted reproductive technologies (e.g., artificial insemination, in vitro fertilization)	<ul> <li>(for servicemembers who lost natural reproductive ability due to injury while on active duty)</li> </ul>	
	Breast pumps	$\checkmark$	✓
Sexual dysfunction treatment	Erectile dysfunction treatment	✓ (external vacuum appliances, penile implants, testicular prostheses, hormone injections, and prescription drugs)	✓ (penile implants only)
	Other sexual dysfunction evaluation and treatment		
STI screening and treatment		$\checkmark$	$\checkmark$

\*The Affordable Care Act, which mandates a set of preventive health services that must be provided with no cost-sharing, does not apply to TRICARE since a different set of statutes apply.<sup>16</sup> However, active-duty servicemembers do not pay co-pays for covered health services or prescriptions.<sup>2</sup>

#### **POLICY RECOMMENDATIONS**

- Abortion for all indications should be covered by TRICARE. To ensure timely access to care without undue hardship on women and their units, abortion care should be provided at MTFs and covered for all women who need it, like other health services. Alternatively, women should be able to pay out of pocket to receive abortion care at MTFs (currently, only women whose pregnancies are the result of rape or incest or endanger their lives are permitted to have an abortion at an MTF).
- Ensure the successful implementation of the Shaheen Amendment. Lessons learned from the Hyde Amendment, which prohibits federal Medicaid coverage of abortion except in cases of rape, incest, and life endangerment, show that operationalizing abortion coverage for exceptions can be challenging.<sup>17</sup> Women must be informed of their right to abortion coverage for rape/incest, and be ensured access to timely, confidential care. Streamlined processes for reporting and determining eligibility will be critical. If abortions are provided outside of the military, claim processing procedures must be in place. If at least some care will be provided at MTFs, it is imperative that health care providers are trained in the provision of evidence-based abortion care.
- Servicewomen should have the same comprehensive health coverage under TRICARE as their male counterparts. In addition to abortion coverage, women in the military should be able to seek care for sexual dysfunction to match the insurance benefits of their male counterparts.
- All OTC contraceptive methods should be covered by TRICARE. In 2011, the Institute of Medicine (IOM) published a report to serve as a comprehensive guide for federal government agencies, which detailed a set of recommendations for women's preventive health services that health plans should cover with no cost sharing (no co-payment, coinsurance, or deductibles).<sup>18</sup> Among these was the recommendation that all Food and Drug Administration-approved contraceptive methods should be covered without cost-sharing in order to prevent unintended pregnancy. The report further stated that this range of methods includes both prescription and nonprescription methods.<sup>18</sup> TRICARE should adopt this IOM recommendation. While all MTFs are required to offer Plan B One-Step®, coverage of spermicide and male and female condoms may vary by branch and location. Mandated condom coverage is important to reduce the risk of unplanned pregnancies and HIV/STI transmission.

## Ibis Reproductive Health

Ibis Reproductive Health aims to improve women's reproductive autonomy, choices, and health worldwide.

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