



Maternal-Fetal Medicine Physicians Oppose Rollbacks to Contraception Access

Washington, DC, October 6, 2017 – *The Society for Maternal-Fetal Medicine (SMFM) released the following statement in response to the final rule issued by the U.S. Departments of Treasury, Labor, and Health and Human Services relating to implementation of the Affordable Care Act's contraception cost sharing provisions:*

"SMFM stands with fellow physicians, nurses, and other health care leaders in opposition to the recently released rule, which would allow any employer to declare itself exempt from including contraception benefits in its health insurance plan. Further, it is extremely concerning that there is no formal process or framework by which an employer would notify the U.S. Department of Health and Human Services (HHS) or its beneficiaries that such a change in coverage is taking place. These changes will cause many women to pay out-of-pocket for their medication without advanced warning, forcing some to forgo contraception because they simply cannot afford it.

The Affordable Care Act (ACA) expanded contraceptive coverage without cost-sharing to millions of women across the nation. No-cost coverage of contraception has contributed to a dramatic decline in the unintended pregnancy rate, including teen pregnancies, which are now at a 30-year low. SMFM advocated for this key legislative provision and supports no-cost contraception as a mechanism to promote the best possible health outcomes for women and children.

An estimated one-half of all pregnancies in the United States are unplanned. According to the Guttmacher Institute, these unplanned pregnancies cost federal and state governments approximately \$12.5 billion per year; of that total, \$5.2 billion are state expenditures.

Research suggests that unintended pregnancies are associated with higher rates of preterm birth and low birth weight infants; missed or delayed prenatal care; greater use of alcohol and illicit drugs during pregnancy; and ultimately poorer pregnancy outcomes for women and infants. Contraception allows women to avoid unintended pregnancies.

The ability to plan, avoid, or space pregnancies is especially important to the women who are cared for by maternal-fetal medicine (MFM) physicians. These women often enter pregnancy with chronic health conditions such as diabetes, hypertension, obesity, heart disease, or mental health conditions that require special management or additional care during pregnancy, and which lead to increased risk for the mother and baby when an unplanned pregnancy occurs. For many women with serious health conditions, pregnancy presents such considerable risks to

maternal health that it is recommended that pregnancy be avoided altogether; such women require lifelong access to highly effective contraceptive options.

We urge the federal government to adhere to the notice of proposed rule-making (NPRM) process which allows for public comment, review and response by federal agencies prior to final issuance and implementation. MFM physicians stand ready to work with policymakers to improve the health of women and children. Widespread access to contraception is one important element of this plan. For our complete set of [maternity care principles](#), visit the SMFM website.”

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About SMFM

The Society for Maternal-Fetal Medicine (est. 1977) is a non-profit membership organization representing the interests of obstetricians/gynecologists who have additional formal education in maternal-fetal medicine. The Society is devoted to reducing high-risk pregnancy complications by providing continuing education to its more than 2,000 members on the latest pregnancy assessment and treatment methods. It also serves as an advocate for improving public policy, and expanding research funding and opportunities for maternal-fetal medicine. SMFM hosts an annual scientific meeting in which new ideas and research in the area of maternal-fetal medicine are unveiled and discussed. For more information, visit SMFM.org.