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Protect, Prevent, Live Well

September 30, 2011

The Honorable Kathleen Sebelius
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Re: Comments on CMS-9992-IFC2, Group Health Plans and Health Insurance Issuers Relating to Coverage of Preventive Services under the Patient Protection and Affordable Care Act

Dear Secretary Sebelius:

The American Public Health Association (APHA), the oldest and most diverse organization of public health professionals and advocates in the world dedicated to promoting and protecting the health of the public and our communities, appreciates the opportunity to provide comments on Health and Human Services (HHS) interim final rule regarding coverage of women's preventive health services under the Affordable Care Act.

We were pleased with HHS's adoption of the Institute of Medicine (IOM) recommendations for the range of services to be covered as preventive health care services for women. The Affordable Care Act's requirement for insurance companies to cover a range of preventive health care services for women without cost-sharing was an important step forward for women's health. We write today in opposition to the proposed religious exemption clause to this rule for certain employers, currently under consideration by HHS. This clause would allow religious employers to deny coverage of and access to certain family planning health care services deemed as preventive care for women by the IOM. Women's access to public health services should be based on what is best for the health of the patient and left to patients and medical professionals, not employers.

The Affordable Care Act's inclusion of coverage of FDA-approved contraceptive methods as preventive health services is a critical step towards reducing our nation's unintended pregnancy rate and enabling women to control the timing and spacing of their pregnancies. According to the IOM, unintended pregnancy can have serious consequences for both women and infants, including late prenatal care, greater risks for the woman of depression and physical abuse, and increased incidence of low birthweight babies leading to higher risks of serious illness and even death in the first year of life.¹ The prevention and wellness benefits provided by contraception

¹ Institute of Medicine. *The Best Intentions*, New York: National Academy Press, 1995, and Brown SS and Eisenberg L, *From the Institute of Medicine*, JAMA 1995;274:1332.

and family-planning services are well documented and should be available to all women, regardless of place of employment.

The IOM's evidence-based recommendations clearly demonstrate the important public health benefits of contraception and family-planning services. We strongly urge you to remove the religious exemption clause as you finalize this important rule. Please contact Lucy Melcher at 202.777.2513 with any additional questions regarding our position.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Alan Baker". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

J. Alan Baker
Interim Executive Director
American Public Health Association