

National Association of Social Workers
Office of the Executive Director

Elizabeth J. Clark, PhD, ACSW, MPH Executive Director

June 19, 2012

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

Re: Comments on "Certain Preventive Services Under the Affordable Care Act," CMS-9968-ANPRM

Dear Secretary Sebelius:

On behalf of the 145,000 members of the National Association of Social Workers (NASW), I am pleased to submit our comments on CMS-9968-ANPRM, regarding the final regulations proposed by the Department of Health and Human Services (HHS) on preventive health services under provisions of the Patient Protection and Affordable Care Act, specifically section 2713 of the Public Health Service Act (CMS-9968-ANPRM).

NASW is a strong supporter of the Affordable Care Act and we urge HHS to maintain the regulations – first proposed on Aug. 1, 2011, confirmed on Jan. 20, 2012, and last modified on Feb. 15, 2012 – that would require all non-church health insurance providers and organizations providing health care plans to cover, or arrange coverage for, preventive health services, such as birth control and contraception, without charging a co-payment. We believe these rules are justified on scientific, constitutional, and ethical grounds.

Social workers have long advocated for access to care and reproductive choice for all women. The NASW Code of Ethics guides social workers to "promote clients' self-determination." NASW's policy statement, *Family Planning and Reproductive Choice*, affirms the fundamental right of each individual to manage his or her fertility and to have access to the full range of effective family planning and reproductive health services, regardless of income, marital status, age, race, ethnicity, gender, sexual orientation, national origin or residence. NASW also supports legislation that ensures privately and publically funded health insurance coverage includes access to all forms of reproductive health technologies and contraceptives.

As HHS recognized in the ANPRM, 28 states have existing legal requirements mandating coverage of contraception in health insurance plans. The federal contraceptive coverage requirement in the Affordable Care Act will help fill in the gaps in current coverage and further reduce disparities by providing women broad access to contraceptive coverage without costsharing. We respectfully request that you make final the proposed rules that require all non-church organizations to provide, or arrange third party coverage for, contraceptive coverage without cost sharing for women.

Thank you for your consideration of our comments. Please do not hesitate to contact us with any questions or concerns.

Sincerely,

Elizabeth Clark, PhD, ACSW, MPH

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Executive Director