FACT SHEET

The Right to Contraception Act

Federal Legislation to Codify this Essential Right

Contraceptive services and supplies are increasingly under threat at the state and federal level, from state efforts to classify some contraceptive methods as abortifacients—which would limit Medicaid coverage of those methods—to federal attempts to eliminate the Title X family planning program. On June 14, 2023, members of Congress reintroduced the Right to Contraception Act, which would enshrine into federal law the right of individuals to access contraception and of providers to offer this basic health service. NFPRHA urges Congress to pass this legislation without delay.

LEGISLATIVE HISTORY

The Right to Contraception Act is H.R. 4121 and S. 1999 in the 118th Congress. The bill is identical in both chambers. Upon introduction the bill was endorsed by 68 organizations.

The bill was introduced in the House of Representatives by Reps. Kathy Manning (D-NC), Sara Jacobs (D-CA), Nikema Williams (D-GA), and Angie Craig (D-MN). It had 135 original cosponsors. Current cosponsors are available on Congress.gov.

The bill was introduced in the Senate by Senators Edward Markey (D-MA), Mazie Hirono (D-HI), and Tammy Duckworth (D-IL). It had 36 original cosponsors. Current cosponsors are available on Congress.gov.

In the 117th Congress a nearly identical version of the bill (H.R. 8373) passed the House on a bipartisan basis in July 2022 with a vote count of 228-195-2.

WHAT DOES THE BILL DO?

The Right to Contraception Act would establish that individuals have a statutory right to obtain contraceptives and to more broadly seek care to prevent pregnancy. This protection extends to all methods of contraception, from fertility awareness-based methods to over-the-counter products to prescription drugs and devices to sterilization.

www.nationalfamilyplanning.org
The bill would further establish that providers have a corresponding right to provide contraceptive services and supplies and information and referrals related to those matters.

Under the bill, no local, state, or federal government entity would be allowed to limit or infringe on these rights with laws that single out or impede access to contraception or related information or services. The government also could not prohibit or restrict the sale or use of contraceptives or bar individuals from helping other people obtain contraceptives.

Individuals, providers, and the Attorney General of the United States would be able to go court to enforce this bill.

**WHAT DOESN’T THE BILL DO?**

The bill does not interfere with the Food & Drug Administration’s (FDA) review of or oversight over contraceptive methods. The bill further clarifies that “contraceptive” refers to drugs, devices, or products that have been approved, cleared, authorized, or licensed by the FDA. Importantly, additional methods not subject to FDA review, such as surgical sterilization, are also covered under the bill.

The bill does not give rights to providers who are not appropriately licensed or authorized by the state in which they practice.

The bill does not encourage coercive practices. The bill reiterates that all contraceptive services, including surgical sterilization, must be voluntary.

To cosponsor this critical legislation, please contact Fabiana Corsi Mendez in Rep. Manning’s office at fabiana.corsimendez@mail.house.gov or Tara Wilson in Sen. Markey’s office at tara_wilson@markey.senate.gov. For additional information, please contact Lauren Weiss at lweiss@nfprha.org or Mindy McGrath at mmcgrath@nfprha.org.