

Office of the Insurance Commissioner  
5000 Capitol Boulevard South  
Tumwater, WA 98501

Submitted electronically to RulesCoordinator@oic.wa.gov

Re: Comments on Consolidated Health Care Proposed Rulemaking (CR-102 for R 2023-07)

November 17<sup>th</sup>, 2023

To whom it may concern,

On behalf of the undersigned organizations, we write today to comment on the Office of the Insurance Commissioner's (OIC) proposed rulemaking on consolidated health care (CR-102 R 2023-07) and the implementation of SB 5242, which prohibits cost-sharing for abortion. We deeply appreciate the clarification that the prohibition on cost-sharing extends to all services related to and provided in conjunction with an abortion, including "health services associated with completing the treatment, including but not limited to office visits, counseling, diagnostic and laboratory testing, and prescription drugs." To ensure seamless coverage, we reiterate our request that regulations implementing SB 5242 prohibit utilization review techniques and annual limitations when accessing abortion services. Thank you for your consideration of the following comments and for the opportunity to provide feedback.

When the Affordable Care Act (ACA) first required coverage of contraceptives without cost-sharing, insurers erected a series of logistical barriers on patients in accessing no-cost care that put benefits out of reach for many patients, demonstrating the need to ensure that OIC is proactively prohibiting practices that limit access to benefits. For example, insurers restricted access to contraceptive methods by imposing medical management or utilization review techniques, including mandating step-therapy or prior authorization. Additionally, some insurers required prior authorization and forced the patient to return for a second office visit to access their method of choice, regardless of what the provider and patient think is the best option. OIC should consider the lessons-learned in the implementation of no cost-sharing for contraceptives when constructing its rules to limit the number of barriers – both financial and logistical – that patients face when accessing abortion services.

As such, **we recommend that the regulation explicitly prohibit insurers from employing unnecessary and burdensome utilization review techniques or annual restrictions when covering no-cost abortion care.** For example, we request that the final rule prohibit prior authorization of abortion services, prohibit annual limitations, and ensure that patients have coverage for the abortion method of their choice. These techniques that effectively deny or delay a person's access to abortion services not only limit reproductive autonomy, they also may lead to a delay in a time-sensitive procedure, which increases the cost to both the patient and the insurer. The OIC should strive to maximize timely access to these critical services and to make the process of accessing these services simple and consumer-friendly.

Thank you for the opportunity to comment. Please contact us with any questions regarding our comments. We look forward to continuing to engage in this process to promote meaningful access to sexual and reproductive health care coverage and services.

Sincerely,

Planned Parenthood Alliance Advocates – Washington  
American Civil Liberties Union of Washington  
Legal Voice  
Pro-Choice Washington  
Northwest Health Law Advocates  
Cedar River Clinics