



## **EMERGENCY CONTRACEPTION ACCESS & EDUCATION ACT OF 2014**

*Sponsored by Senators Patty Murray, Barbara Boxer, Richard Blumenthal, Elizabeth Warren, and Cory Booker*

Emergency contraception is a responsible means of preventing unintended pregnancy. Each year, over 3 million pregnancies – or one-half of all pregnancies in the United States – are unintended. Four in ten of these unintended pregnancies end in abortion. The Food and Drug Administration (FDA) has declared emergency contraception to be safe and effective in preventing unintended pregnancy for women of reproductive potential and has approved the emergency contraceptive Plan B One-Step for unrestricted sale on pharmacy shelves to women of all ages. However, emergency contraceptive use in the United States remains low, and many women are unaware of this preventive method. Only half of obstetricians/gynecologists offer emergency contraception to all of their patients, suggesting the need for greater provider and patient awareness, as well as education in the United States.

This need is particularly acute for survivors of sexual assault. Nearly one in five American women is a survivor of rape. It is estimated that 25,000 to 32,000 women become pregnant each year as a result of rape or incest. Survivors of sexual assault are also at increased risk of contracting sexually transmitted infections. If used correctly, emergency contraception in conjunction with prompt medical treatment could help many of these rape survivors avoid the additional trauma of facing an unintended pregnancy. However, only thirteen states and the District of Columbia require hospital emergency rooms to provide emergency contraception upon request to survivors of sexual assault. Additionally, nine states have enacted restrictions on emergency contraception, including six states that allow pharmacists to refuse to dispense emergency contraception.

### **LEGISLATIVE SUMMARY**

The *Emergency Contraception Education Act of 2014* would:

- Require any hospital that receives federal funding under Medicare or Medicaid to provide survivors of sexual assault with accurate and unbiased information about emergency contraception, offer emergency contraception to the woman and promptly provide it at her request. In addition, hospitals must provide these services to survivors of sexual assault regardless of their ability to pay.
- Direct the Secretary of Health and Human Services to develop and disseminate to the public information on emergency contraception, including a description of emergency contraception and an explanation of the use, safety, efficacy, and availability of EC.
- Require the Secretary to develop and disseminate to health care providers, including pharmacists, information on emergency contraception that includes: information describing the use, safety, efficacy, and availability of emergency contraception; a recommendation regarding its use in appropriate cases; and information explaining how to obtain copies of information from the Center for Disease Control and Prevention (CDC).