



Accessing Contraceptives in Louisiana: A Toolkit for Young Adults



lift louisiana

Acknowledgments

This guide was originally written by Charlotte Cassel of Purpose Strategies, with input and edits from Elizabeth McCaman Taylor, Madeline Morcelle, Christina Picora, and Rachel Utz, of the National Health Law Program, Alison Yager of Florida Health Justice Project, and Andrea Schmidt and Logan Foster, University of Florida students.

It has been updated with the help of Alex Moody and Michele Erenberg with Lift Louisiana.

The National Health Law Program (NHeLP) protects and advances the health rights of low-income and underserved individuals. Founded in 1969, NHeLP advocates, litigates, and educates at the federal and state levels. Consistent with this mission, NHeLP works to ensure that all people in the United States have access to comprehensive preventive health services, including contraception.

Lift Louisiana works to build a better Louisiana for women, girls and gender expansive people by advocating for reproductive health, rights, and justice. Founded in 2016, Lift was created as a direct response to the pressing need for strategic advocacy in a state with significant barriers to reproductive freedom. Lift uses data-driven educational materials, community engagement and policy advocacy, and legal advocacy to empower individuals to work to dismantle obstacles to reproductive justice.

Please note that this Toolkit was last updated in March 2026. As such, all discussion of laws, policies, and litigation are correct as of March 2026.



lift louisiana

Accessing Contraceptives in Louisiana: A Toolkit for Young Adults

In this toolkit you will find:

Introduction	4
Contraceptives.....	5
Health Insurance Basics.....	7
The Patient Protection and Affordable Care Act (ACA)	8
Medicaid	10
Additional Public Health Care Programs.....	14
Impact of <i>Dobbs v. Jackson Women’s Health Organization</i>	15
What Does Your Health Insurance Cover?	16
What To Do if Your Contraceptives Are Not Covered	17
Know Your Rights: Protections from Discrimination in Contraceptive Care.....	17
Appendix: Additional Resources on Contraceptive Access.....	20



lift louisiana

Introduction

This toolkit has been developed to assist young adults in Louisiana with understanding their rights to access contraceptives under various health insurance programs and policies. While the reproductive health care landscape continues to evolve, both within Louisiana and nationally, this guide is designed to provide basic information about how to access contraceptives. This toolkit also provides information to ensure that those who are denied coverage of contraceptives to which they are legally entitled have an understanding of how to advocate for themselves and/or their friends and family.

This information is for educational purposes only and is not legal advice.

Stigma

Before we dive deeper into specific provisions around access to contraceptives, it is important to recognize the potential challenges that can come up when exploring these issues. Our culture normalizes a significant amount of shame and stigma related to sexual activity and contraception. But, contraception is essential health care.¹ And, as with any other type of health care, it is important that you have accurate information in order to best advocate for yourself.

We also recognize that contraceptive care and the counseling surrounding it can still be very gendered. However, it is important to recognize that contraceptive care is important for everyone.²

To learn strategies for overcoming the stigma associated with these topics, please check out [this](#) resource from Teen Health Mississippi.

Contraceptives

Contraception, often called birth control or family planning, consists of medications, devices, and other methods to prevent unwanted pregnancy. Certain contraceptives can also be used to try to prevent some STIs. And certain contraceptive medications can be used to manage the symptoms of various chronic health conditions, such as [adenomyosis](#), [Ehlers-Danlos Syndrome](#), [endometriosis](#), [polycystic ovary syndrome](#) (PCOS), and [uterine fibroids](#). Additionally, contraceptives can help reduce [acne](#), [irregular periods](#), and [heavy menstrual bleeding](#), as well as support [assisted reproduction](#) treatments, and many other health services.

There is a large range of contraceptive drugs and devices available, from pills you take daily, to intrauterine devices (IUDs) that can last for over a decade. Some contraceptives are available over-the-counter in local retail stores, and others require a prescription from your health care provider. Some contraceptives prevent pregnancy using hormones, like the pills, ring, or the patch, while others are non-hormonal, like condoms or the copper IUD. Your medical provider should be able to provide you with information on some or all contraceptives, and you may want to try out a few types before settling on your preferred one.



[Information about contraceptive methods](#)

[Information about accessing free external condoms and other HIV/STI prevention materials in Louisiana](#)



Opill

As of March 2024, [Opill](#) is the first FDA approved, daily oral contraceptive pill to be available without a prescription in the United States. Opill is available to be bought at retail stores and online. It is a progestin-only hormonal contraceptive pill to be taken daily. It is not to be used as an emergency contraceptive.

Emergency Contraception (EC)

There is a great deal of misinformation and confusion about emergency contraception (EC), including inaccurate claims that it is a form of abortion. This section aims to arm you with accurate information.

EC, just like all other kinds of contraception, prevents pregnancy before it occurs. The main difference is that EC is taken on a one-time basis and should be taken as soon as possible after unprotected sex.

There are three forms of EC available, and all should be covered by your insurance plan if you have a marketplace (Obamacare) or private plan:

1. Levonorgestrel emergency contraception (sold as [Plan B One-Step](#) and several generic forms including [Julie](#) and [My Way](#)), which is available over-the-counter (without a prescription/on the shelf) but a prescription is most likely required for insurance coverage; and can be taken up to 72 hours after unprotected sex.
2. Ulipristal Acetate, (like [Ella](#)) which is only available by prescription and can be taken up to 5 days after unprotected sex.
3. IUDs, which are available only by prescription and in addition to acting as EC, are a long-term option for contraception. IUDs require insertion by a health care provider.

There are no age restrictions on purchasing over-the-counter EC.

[Louisiana law](#) requires that survivors of sexual assault seeking medical care associated with that assault be offered information about EC, and, upon request and after a negative pregnancy test, be provided access to EC during their visit. This applies to all hospitals and health care providers, regardless of religious affiliation.³

For more information about how to access EC in Louisiana you can visit:

- [Big Easy EC](#)
- [NOW Baton Rouge](#)
- [Plan B NOLA](#)

Emergency Contraceptives: “Advanced Provision”

What are Advanced Provision Emergency Contraceptives?

This is when you may need EC in the future, so to be prepared, you decide to stock up now. Make sure to check the expiration dates, but these medications typically have a shelf life of 3-4 years.

You can always stock up on over-the-counter Plan B without talking to any health care provider, but it does mean you’ll have to purchase it for around \$50. To get a prescription for Plan B or Ella, you’ll have to talk to a health care provider first, but it is more likely that your EC will be free.

Health Insurance Basics

What is Health Insurance?

Health insurance helps to offset, or cover, the cost of routine and emergency medical visits, prescription medications, and possibly other medical or health care related expenses. The amount an individual pays to have this insurance, also known as coverage, and the amount the plan or program will pay in benefits, depends on the particulars of each plan or program. When you have health insurance it means that if you need to see a doctor for a routine exam or because you are sick, if you have an accident, or if you need certain types of medications or medical procedures, the insurance program or company agrees to cover some, most, or all of the expenses.

How Do You Get Health Insurance?

There are four (4) main ways that people across the United States get health insurance. These are:

1. From their employer;⁴
2. On the insurance marketplace (i.e., www.HealthCare.gov);
3. From a government sponsored program, such as Medicaid, CHIP, Medicare, or Tricare; and
4. As a dependent on their parent(s)’ or legal guardian(s)’ plan.⁵

You may also be able to obtain coverage through a college or university. In fact, most colleges or universities will require some form of health insurance for students.



How Does Health Insurance Work?

There are four (4) basic elements of health insurance that are important to understand. These include the following:

1. **Copayments.** These are payments that you make to your health care provider each time you get care. For example, you may be required to pay \$20 every time you visit a primary care doctor or pay 25% of any hospital bill.
2. **Premiums.** This is the amount paid (by you, your employer or the government, depending on the type of plan you have) to the insurance company each month.
3. **Deductibles.** This is the amount you have to spend out-of-pocket on covered health services before your insurance company will pay. For example, you might have to pay \$500 for medical services (excluding free preventive services) before the insurance company will begin to cover any portion of care.
4. **Out-of-pocket Maximum.** This is the maximum amount you are required to spend for covered services in a year. After you reach this amount, the insurance company will begin to pay 100% of covered services.



For more specific information on these important elements of health insurance, please [click here](#).

The Patient Protection and Affordable Care Act (ACA)

A Brief History of the ACA

The Affordable Care Act (ACA), also known as “Obamacare,” was passed in 2010. The ACA is one of the most important and significant pieces of health care legislation in U.S. history.

The ACA expanded access to affordable health insurance and, thereby, health care to millions of people across the country. While the law is extremely comprehensive, there are certain key provisions and protections that are particularly important.

Key ACA Coverage Provisions

1. **Expansion of public programs.** Under the ACA, states were offered the opportunity to expand their Medicaid programs, with a significant portion of the cost being covered by the federal government. As of January 2026,

all states except for ten (10) have chosen to expand their Medicaid programs. Louisiana became a Medicaid expansion state in 2016.

2. **Health insurance exchanges (the Marketplace).** The ACA created a national health insurance marketplace, www.marketplace.gov, where individuals can obtain coverage. Based on their income, many people across the country receive a federal subsidy that helps to offset the cost of their monthly insurance premium. This makes the health insurance plans on the marketplace significantly more affordable, with many people paying \$0, or very low amounts, per month.
3. **Coverage for young people.** The ACA extended the age (**up to 26**) that children can stay on their parents' private insurance plans.
4. **Benefits.** The ACA requires most plans to cover [ten essential health benefits](#). Additionally, all private plans must cover a range of [preventive services](#), including [contraception/family planning services](#), with **no co-payment or cost-sharing**, and before meeting the deductible.
5. **Employer requirements.** This is a requirement that companies of a certain size offer health insurance to their full-time employees. The insurance offered must be "affordable" and have "minimum essential coverage," which means that certain types of care and services *must* be covered.



You can find more detailed information on the ACA's coverage-related protections [here](#).

Key Protections from Discrimination

A number of key protections in the ACA aim to protect people from health care discrimination.

Some of these protections include:

1. **Protections for people with pre-existing health conditions.** Before the ACA, health insurance plans could deny coverage for or charge more to cover people diagnosed with health conditions (like pregnancy or chronic conditions like endometriosis and HIV) before they purchased the insurance. The ACA made this discrimination illegal.
2. **Protections against discrimination.** The ACA prohibits health care discrimination based on race, color, national origin (e.g., Limited English Proficiency), sex (e.g., pregnancy or related conditions, sex stereotypes, gender identity, sexual orientation, and sex characteristics, including intersex traits), disability, age, or any combination. It applies to most

health insurance programs and plans, most health care providers, and more. The ACA was the first federal civil rights law to broadly prohibit sex discrimination in health care. It was also the first to ban intersectional discrimination, discrimination targeting someone based on multiple identities, such as for being a Black woman with Limited English Proficiency. Thus, it is a critical tool for addressing discrimination in contraceptive access. We discuss these protections in further depth on [page 18](#).

Contraceptive Coverage Under the ACA

If you have health insurance through the marketplace, or a private plan governed by the ACA, then you may have special protections for contraceptive coverage. One type of every FDA-approved contraception *must* be covered. If you want the pill, patch, injection, condoms, spermicide, or any other type of method that works for you, there should be a free option available to you. This doesn't mean every single product used to prevent pregnancy will be covered. In other words, your plan might cover one type of hormonal IUD, but not another brand. If there is a medical reason why you need a particular contraceptive, then your provider can let your insurance know and it must be covered. This is known as a "[medical necessity](#)."

Medicaid

The next section covers Medicaid, which is the largest source of public funding for family planning services.

What is Medicaid?

Medicaid is a joint federal and state program that helps provide health coverage to certain eligible adults with low incomes, children, pregnant women, older adults, and people with disabilities. Medicaid is jointly financed by states and the federal government. The federal government requires that the states follow certain guidelines, but there is broad variety across state programs.



Who is Eligible?

Louisiana is a Medicaid expansion state, meaning that nearly all adults with incomes up to 138% of the Federal Poverty Level are eligible for coverage. Other qualifying circumstances include:⁶

1. Pregnant and postpartum individuals for up to 12 months after pregnancy ends.⁷

2. Individuals living with a disability according to [SSA's definition](#).
3. Individuals with corrected vision no better than 20/200.
4. Low-income parents of children under age 19.
5. Children under 19.
6. Uninsured individuals who need treatment for breast and/or cervical cancer.
7. Low-income Medicare recipients.
8. Individuals aged 19 to 64 years old who have a household income less than 138% of the federal poverty level, don't already qualify for Medicaid or Medicare, and meet citizenship requirements.⁸
9. Individuals getting financial help from the Office of Family Support (OFS) through the [Family Independence Temporary Assistance Program \(FITAP\)](#).

For more specific details on who can obtain coverage with full benefits under the Medicaid program in Louisiana, please visit the [Louisiana Department of Health's website](#) or contact their Medicaid office directly.

If you are not eligible for full scope Medicaid, you may still be eligible for more narrow sexual reproductive health care benefits (including contraceptive coverage) in another Medicaid program. To learn more, please visit [Take Charge Plus](#) (see [page 12](#) below for more information).

Applying for Medicaid in Louisiana

The easiest way to apply for coverage is online, by visiting <https://sspweb.lameds.ldh.la.gov/selfservice/>. You will need to create an account and will then be asked a series of questions to determine whether you are eligible for coverage, and if so, for which category. The scope of your coverage depends on your eligibility category.

If you don't want to apply online, you can also [download and print an application](#), apply over the phone by calling 1-888-342-6207, or apply in person by visiting any [local application center or regional Medicaid office](#).



Contraceptive Coverage in Louisiana Medicaid with Full Benefits

What Services are Covered?

Full Medicaid covers a [broad array](#) of services, including:

- Physician services;
- Family planning services and supplies;
- Prescription drugs;
- Pregnancy-related services and services for conditions that might complicate pregnancy;
- Services furnished by a nurse-midwife who is legally authorized under state law to render the care;
- Counseling and pharmacotherapy for cessation of tobacco use by pregnant women;
- Outpatient hospital services;
- Rural health clinic services;
- Federally-qualified health center services;
- Comprehensive preventive and treatment health care services for enrollees under age 21; and
- Services furnished by a pediatric nurse practitioner or certified family nurse practitioner authorized to render care.

“[Family planning services and supplies](#)” is a federally mandated Medicaid benefit that all plans are required to cover. Under federal law, Louisiana must ensure that Medicaid enrollees are “free from coercion or mental pressure and free to choose the method of family planning to be used.”⁹

As of 2023, Louisiana law requires all Medicaid plans to cover a 6-month supply of contraceptives to be dispensed at one time.¹⁰ Because many people in Louisiana live in areas at risk of natural disasters, this extended supply can be critical for continuity of care in case of an evacuation. This can also be helpful for people living in rural or other medically underserved areas who face barriers to accessing care. You can request a 6-month prescription from your medical provider.

Contraceptive Coverage Under Louisiana’s Medicaid Family Planning Waiver Program

In Louisiana, if you are not eligible for full-scope Medicaid, you may qualify for coverage under the Medicaid Family Planning Waiver known as [Take Charge Plus](#), which provides contraceptive and certain other reproductive and sexual health care coverage. Take Charge Plus is available to all people who meet the

criteria, regardless of whether or not they have other insurance. Apply for Take Charge Plus [here](#).

Who is Eligible?

Louisiana residents of any gender who:

1. Are of child-bearing age;¹¹
2. Have family income at or below 138 percent of the federal poverty level;
3. Are not pregnant; and
4. Have not had a sterilization procedure prior to program participation.

Family Size	Monthly Income Limit
1	\$1,800
2	\$2,433
3	\$3,065
4	\$3,698
5	\$4,330
6	\$4,963
7	\$5,595
8	\$6,228
For each extra person, add \$633	

What Services are Covered?¹²

1. 7 office visits (per calendar year), including a well visit and care related to family planning
2. Prescriptions and lab work related to family planning or family planning-related services
3. Birth control (including pills, patches, implants, injections, condoms, diaphragms and IUDs)
4. Cervical cancer screening and treatment for cervical dysplasia
5. Contraceptive counseling and education
6. Testing and treatment for sexually transmitted infections (STIs other than HIV/AIDS and hepatitis)
7. Voluntary sterilization for males and females (over age 21)
8. Vaccines for males and females for the prevention of HPV (the virus that causes cervical cancer in women)
9. Transportation for family planning appointments



Specific questions about Take Charge Plus or any other Louisiana Medicaid program can be submitted to the Louisiana Department of Health using [this form](#).

Additional Public Health Care Programs

Beyond Medicaid and other health insurance programs and plans, there are health care safety net programs that provide sexual and reproductive health services, including:

Title X Family Planning Program. Title X family planning clinics provide a broad range of services related to achieving and preventing pregnancy, and assisting people with achieving their desired number and spacing of children. Beyond contraception, clinics provide related sexual and reproductive health services, including preventive care for STIs. Anyone can receive services at a Title X-funded health center, regardless of age, sex, income, insurance coverage or status, immigration status, race, sexual orientation, gender identity, or any other characteristic. Find a Title X family planning clinic near you [here](#).

Federally Qualified Health Centers (FQHCs). Federally qualified health centers or clinics serve medically underserved areas and populations. They provide primary care services on a sliding fee scale based on the patients' ability to pay. Under federal law, FQHCs are required to provide "voluntary family planning" services along with a broad range of health services.¹³ This can include preconception care, STI treatment and screening, and contraception. Virtually all FQHCs report providing at least one method of contraception at one or more of their clinical sites.¹⁴ Similar to Title X clinics, FQHCs have sliding fee discounts that determine service costs based on ability to pay. Find a FQHC or look-alike clinic near you [here](#).

Louisiana-specific Organizations/Places that May Help with Accessing Contraceptives

- [Louisiana's Reproductive Health Program](#)
- [Plan B NOLA](#)
- [Big Easy EC](#)
- [NOW Baton Rouge/PlanBR EC delivery](#)
- [Lift Louisiana's Pregnancy Prevention Resources Page](#)
- [Planned Parenthood Gulf Coast Louisiana Patient Resource Guide](#)¹⁵
- [The Yellowhammer Fund](#)



Learn more about these programs in the [Appendix](#) at the end of this toolkit.

Impact of *Dobbs v. Jackson Women's Health Organization*

In June 2022, the U.S. Supreme Court issued its decision in *Dobbs v. Jackson Women's Health Organization (Dobbs)*, overturning the constitutional right to abortion in the United States. As a result, the question of abortion rights was left to the states.

In response, numerous states immediately rolled back access to abortion services, while some affirmed the right to abortion. On June 24, 2022, Louisiana began enforcing its total abortion ban, which prohibits abortion at all stages of pregnancy except where necessary to avoid the pregnant person's death or serious risk of substantial physical impairment of a major bodily function, or if the pregnancy is medically futile.¹⁶ In 2024, Louisiana also reclassified misoprostol and mifepristone, two medications commonly used in abortion care as well as to treat other medical conditions, as Schedule IV controlled dangerous substances.¹⁷

On its face, these changes should have no impact on the legal right to contraception. Contraceptive care, including emergency contraception, is medically and scientifically distinct from abortion care, because contraceptive care occurs *before* pregnancy occurs and abortion care occurs once someone becomes pregnant. Nonetheless, it is impossible to attack one type of sexual or reproductive health service without seeing ripple effects on other services.¹⁸

The *Dobbs* decision has caused gaps in access and coverage within both contraceptive and other forms of reproductive care. *Dobbs* has impacted contraceptive access most directly through clinic closures and a significant



number of health care providers who provide the full spectrum of reproductive health care leaving states with enacted abortion bans.¹⁹ It has also emboldened pharmacies and insurance plans to deny access to medications that treat chronic conditions, such as rheumatoid arthritis and cancer, that can also end pregnancies. While contraception can never replace abortion, we encourage people to make a plan for their birth control, now more than ever, if they want to avoid pregnancy.

What Does Your Health Insurance Cover?

Program or Plan Documents

While they are heavy with legalese and not easy to wade through, there are multiple documents that explain your health insurance program or plan benefits. These documents include:

1. [Summary](#) of Benefits and Coverage (SBC)²⁰
2. Evidence/Explanation of Coverage (EOC)²¹
3. [Evidence](#)/Explanation of Benefits (EOB)²²
4. Formulary List²³ (a list of all medications covered by your plan)

Red Flags

The documents from your health plan may reveal some problems. Here are a few examples:

1. Exclusions
 - a. Certain products are excluded (e.g. male devices not covered)
 - b. Certain procedures are excluded (e.g. IUD removal not covered)
2. Prior authorization²⁴
 - a. Prior authorization (also called “preauthorization” and “precertification”) refers to a requirement to receive approval from the health plan before the service is covered.
 - b. Can be problematic when an insurance company denies coverage that has been recommended by a health care provider.
3. Step therapy
 - a. Step therapy is a utilization management practice in which an insured individual must try a specific drug or device to treat a medical condition before the insurance plan will cover an alternative—often more costly—option for the same condition. This practice is relatively common in the context of contraceptive care. For example, an issuer may require an individual to try a hormonal pill before covering an IUD. Importantly, guidance from CMS prohibits the use of step therapy for contraceptive drugs for Medicaid enrollees.²⁵
 - b. It is problematic when the insurance company uses it to interfere with your preference and your provider’s medical advice.

Privacy from parents/guardians

As a result of the ACA expanding the age limit of coverage to 26, more young adults now remain on their parents' health plans.²⁶ In these cases, because the parent is the primary insured individual, an Explanation of Benefits (which explains services used and paid for or not paid for by the plan) is sent to the parents after their dependents receive any sort of medical care.

It is important to note that in Louisiana, there is no requirement that medical staff or insurance plans offer an opportunity for confidential communications for minors.²⁷ This is one reason why many teens and young adults get reproductive and sexual health care services at free clinics, such as [Title X clinic sites](#)—to avoid using their insurance and having an EOB sent to their parents or legal guardians.

What To Do if Your Contraceptives Are Not Covered

As laid out in this document, the majority of contraceptives should be covered at no or low cost to you, either through your health insurance or through a free or low-cost clinic. However, there are often significant barriers to getting coverage for these services, even when there shouldn't be.

If you have issues getting your contraceptives covered, there are resources available to help you, such as sample letters and step-by-step instructions drafted by the [National Women's Law Center](#). If you believe you are being denied contraceptive coverage due to discrimination, see the next section.

Know Your Rights: Protections from Discrimination in Contraceptive Care

The Affordable Care Act makes it illegal for certain health care entities to discriminate against people based on their race, color (ethnicity), the country they are from, sex (e.g., gender identity, sexual orientation, pregnancy or related conditions, sex stereotypes, intersex traits), limited English skills, disability, or age. Sex discrimination can mean being denied access to care, insurance coverage, or medically accurate information because you are a woman, LGBTQI+, or pregnant. It can also mean health care discrimination based on

your reproductive decisions or whether you are married or have children. We want to help you know your rights and what you can do if they are not respected.

What kinds of discrimination related to sexual and reproductive health care are illegal under the ACA?

The following examples may be illegal discrimination under the ACA, **but you will need individual legal advice to confirm:**

1. If your pharmacy usually provides other types of contraception (e.g., external condoms) but refuses to fill your emergency contraceptive prescription.
2. If your health care provider refuses to provide pain management for IUD insertion or dismisses your concerns or experience with pain from the procedure.
3. If your doctor treats you unfairly when you ask for contraceptives based on your past, present, or future reproductive decisions, including abortion.
4. If your health care provider denies you contraceptives because of your race or disability, even though they provide this care to other people.
5. If your nurse refuses to discuss your options for contraception because of your race or disability.
6. If your health care provider denies you a contraceptive prescription because you are not married, because you are married, or because you are in a same-sex relationship.
7. If your pharmacist denies you a refill for the contraceptives you need to manage a health condition because they think it could end a future pregnancy (note: contraception cannot end a pregnancy, it can only prevent pregnancy).

Who needs to follow this law?

Anyone in health care who receives federal funding, such as:

- Health care entities such as hospitals, doctor's offices, federally qualified health centers, and pharmacies. If they accept Medicare, Medicaid, or LaCHIP from anyone, they must follow these rules, even if you have different insurance.
- Title X family planning clinics ([find a clinic near you](#)) and federally qualified community health centers ([find a health center near you](#)).
- Most health insurance, such as Medicare, Medicaid, LaCHIP, and plans on [HealthCare.gov](#).
- Hospitals that get federal funding.
- Some clinical trials.
- Many medical and other health care professional schools.

What can I do if I experience discrimination?

If you believe your civil rights (including health care access) were not respected, you can reach out to [legal aid organizations](#) operating in your Parish to request free or low-cost legal help. For health insurance discrimination, you can also file a complaint with the [Louisiana Department of Insurance](#).

Appendix: Additional Resources on Contraceptive Access

For more in-depth information on some of these issues please see the following resources.

Contraceptive Coverage and Access in Medicaid

- For a comprehensive guide on Medicaid coverage of reproductive and sexual health services (including contraceptives) and related issues, see [An Advocate's Guide to Reproductive and Sexual Health in the Medicaid Program \(2nd Ed. 2019\)](#), National Health Law Program (NHeLP) (in-depth guide)
 - [2023 Supplement](#) (with updates on legal and policy developments from 2019 - 2023)
- [Medicaid Coverage of Family Planning Services Delivered via Telehealth](#), NHeLP

Contraceptive Access in Other Public Health Programs

- [Title X Clinic Locator](#)
 - [Title X Resources](#), Guttmacher
 - [Title X Fact Sheets and Reports](#), National Family Planning and Reproductive Health Association
 - [Featured Title X Resources](#), KFF
- [FQHC Locator](#)

Nondiscrimination Protections Related to Sexual and Reproductive Health Care

- [Questions and Answers on the 2024 Final Rule Addressing Nondiscrimination Protections Under the ACA's Section 1557](#), NHeLP

Over-the-Counter Access to Contraceptives

- [Gulf South Plan B](#)
- [Yellowhammer Fund](#)
- [Free the Pill Coalition](#)
- [Opill Cost Assistance Program](#)

Reproductive Justice

- [A New Vision for Reproductive Health, Reproductive Rights, and Reproductive Justice, Forward Together \(issue brief\)](#)
- [Women With a Vision](#)
- [Birthmark Doula Collective](#)

Equitable Contraceptive Access for People with Disabilities

- [2025 Landmines and Pathways in the Fight for Sexual and Reproductive Health Care Equity for People with Disabilities, NHeLP](#)

Additional Resources

- [Sexual Trauma Awareness and Response \(STAR\)](#)
- [New Orleans Adolescent Reproductive Health Project](#)
- [Tulane Adolescent Drop-In Center for unhoused and at-risk youth](#)
- [If/When/How Internet Safety](#)
- [Minor Consent and Confidentiality in Louisiana](#)

References

- 1 Am. Coll. Obstetricians & Gynecologists, Comm. Op. No. 615: Access to Contraception (Jan. 2015 (reaffirmed 2022)) <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2015/01/access-to-contraception#> (last visited June 22, 2025).
- 2 To that end, we strive to use gender inclusive language to accurately reflect the scope of people with various reproductive and sexual health care needs and related experiences. However, it is important to note that we employ “women” in limited instances when necessary to accurately reference legal terms or cisgender women-centered research and to honor how advocates or groups self-identify. More inclusive policy language and research is needed to better service the needs of all people who need equitable access to reproductive, sexual, and all health care.
- 3 LA. REV. STAT. § 40:1216.1(A)(8) (2022).
- 4 To obtain health insurance through your employer, it is suggested that you speak with the Human Resources (HR) Department and/or your supervisor.
- 5 In order to remain on your parent or guardian’s health insurance plan, they will need to make sure to include you on their annual sign-up. Children can usually remain on their parents private insurance until age 26.

- 6 Louisiana Department of Health, *Medicaid Information*, <https://ldh.la.gov/page/Medicaid-Information> (last visited January 20, 2026).
- 7 La. Admin. Code tit. 50, § III-2330
- 8 “To be eligible for Medicaid in Louisiana, you must be a resident of Louisiana and either a U.S. citizen or a non-citizen who is lawfully present in the U.S. Non-citizens (residing legally or illegally) can qualify for coverage for emergencies and labor and delivery services if income requirements are met. Medicaid and LaCHIP coverage may be available to children up to age 19 who are lawfully residing and are otherwise eligible.” <https://ldh.la.gov/faq/category/72>
- 9 42 CFR § 441.20
- 10 LA. REV. STAT. § 40:1248.21 (2022)
- 11 This includes minors who are under the age of 19 who wish to access family planning services.
- 12 Louisiana Department of Health, *Frequently Asked Questions: Take Charge Plus* (last visited January 15, 2026), See also; Louisiana Medicaid, *Provider Services Manual - October, 2014* CHAPTER 48: FAMILY PLANNING – TAKE CHARGE PLUS, <https://www.lamedicaid.com/provweb1/providermanuals/manuals/TCP/TCP.pdf>.
- 13 42 U.S. Code § 254b
- 14 Kaiser Family Foundation, *Financing Family Planning Services for Low-Income Women: The Role of Public Programs* (May 11, 2017), <https://www.kff.org/report-section/financing-family-planning-services-for-low-income-women-the-role-of-public-programs-issue-brief/>.
- 15 As of September 30, 2025, Planned Parenthood clinics are no longer operating in Louisiana. This resource guide includes a list of trusted community health clinics and providers across the state that offer sexual and reproductive health services.
- 16 LA. REV. STAT. § 14:87.7 (2022).
- 17 LA. REV. STAT. § 40:964 (2024).
- 18 Dima M. Qato, et al., Use of Oral and Emergency Contraceptives After the US Supreme Court’s Dobbs Decision, *JAMA Netw Open*. (June 26, 2024), https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2820370?utm_source=For_The_Media&utm_medium=referral&utm_campaign=ftm_links&utm_term=062624#249813169 (last visited June 23, 2025).
- 19 Kate Wells, Why so many clinics that provide abortion are closing, even where it’s still legal, *NPR* (May 16, 2025), <https://www.npr.org/sections/shots-health-news/2025/05/16/nx-s1-5397314/planned-parenthood-clinics-abortion-close-telehealth-rights> (last visited June 23, 2025).
- 20 Marketplace, *Understanding the Summary of Benefits and Coverage (SBC)*, <https://marketplace.cms.gov/technical-assistance-resources/summary-of-benefits-fast-facts.pdf> (last visited June 21, 2025).

- 21 National Disability Navigator: Resource Collaborative, *Fact Sheet #2: Getting and Using Health Plan Evidence of Coverage*, <https://nationaldisabilitynavigator.org/ndnrc-materials/fact-sheets/fact-sheet-2/>.
- 22 <https://www.healthinsurance.org/glossary/explanation-of-benefits/> (last visited Jun. 16, 2025).
- 23 HealthCare, *Formulary*, <https://www.healthcare.gov/glossary/formulary/#:~:text=A%20list%20of%20prescription%20drugs,Also%20called%20a%20drug%20list> (last visited Jun. 16, 2025).
- 24 Kaye Pestaina and Karen Pollitz, *Examining Prior Authorization in Health Insurance*, KFF (May 20, 2022) <https://www.kff.org/policy-watch/examining-prior-authorization-in-health-insurance/> (last visited June 21, 2025).
- 25 Centers for Medicare & Medicaid Services, *CMCS Informational Bulletin, Medicaid Family Planning Services and Supplies: Requirements and Best Practices* (Aug. 8, 2024), <https://www.medicaid.gov/federal-policy-guidance/downloads/cib08082024.pdf>.
- 26 Eden Volkov et al., *Health Insurance Coverage and Access to Care Among Young Adults, Ages 19 to 25*, ASPE: Health Policy (Oct. 31, 2024) <https://aspe.hhs.gov/sites/default/files/documents/5fa0b22f718d98887c8a758172058de3/Young%20Adults%20Coverage%2010-31-2024.pdf>.
- 27 National Center for Youth Law, *Louisiana: Minor Consent and Confidentiality* (August 2024). <https://youthlaw.org/wp-content/uploads/ncylminorconsentcompendium2024-louisiana.pdf>.



lift louisiana