



# State of Tennessee

## PUBLIC CHAPTER NO. 686

HOUSE BILL NO. 1320

By Representatives Stewart, Staples, Clemmons, Powell

Substituted for: Senate Bill No. 883

By Senator Yarbro, Harris

AN ACT to amend Tennessee Code Annotated, Title 8; Title 63; Title 68 and Title 71, relative to long-acting reversible contraceptives.

WHEREAS, half of all pregnancies in the United States each year are unintended; and

WHEREAS, a broad range of acceptable and effective contraceptives can reduce the chance of unintended pregnancy; and

WHEREAS, a client-centered approach affords women the opportunity to select the contraceptive method that is most appropriate based on her personal preferences and medical needs; and

WHEREAS, Voluntary Reversible Long-Acting Contraception (VRLAC), also known as Long-Acting Reversible Contraceptives (LARCs), are extremely effective at preventing pregnancy, are extremely safe, and can provide protection for up to ten years; and

WHEREAS, according to the Centers for Disease Control and Prevention, only about seven percent of women aged fifteen to forty-four currently use VRLACs or LARCs; and

WHEREAS, in Colorado, where there has been a program to make VRLACs or LARCs more widely accessible, the state reported a forty-eight percent decline in birthrates among teens and a forty-eight percent decline in teen abortions; and

WHEREAS, high upfront costs, a lack of adequate training for healthcare professionals, administrative barriers, and insufficient information and education have made VRLACs or LARCs more difficult to access than other forms of birth control; and

WHEREAS, this law is enacted to protect the health, safety, and welfare of women and families by making VRLACs or LARCs more accessible; now, therefore,

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. This act shall be known and may be cited as the "Long-Acting Birth Control Information Act."

SECTION 2. Tennessee Code Annotated, Title 68, Chapter 1, Part 1, is amended by adding the following as a new section:

(a) As used in this section:

(1) "Family planning centers" means health clinics that receive funding under the Title X program overseen by the U.S. department of health and human services, Pub. L. 91-572, as well as other health clinics that the commissioner of health finds are qualified and willing to perform comprehensive family planning services; and

(2) "Voluntary reversible long-acting contraception" or "VRLACs," also known as "long-acting reversible contraceptives" or "LARCs," means highly effective methods of contraception that last for several years and are easy to use. VRLACs include, but are not limited to, intrauterine contraceptives and birth control implants.

(b)

(1) The department of health shall administer a program to improve access to VRLACs for women.

(2) The program shall include:

(A) Training for family planning centers regarding contraceptive methods, including VRLACs, client-centered and non-coercive counseling strategies, and managing side effects;

(B) Training for all public health facilities to ensure that they are qualified and able to provide forms of contraception, including VRLACs;

(C) Assistance to family planning centers regarding administrative or technical issues such as coding, billing, pharmacy rules, and clinic management related to the provision of forms of contraception, including VRLACs and other methods;

(D) General financial support to expand the capacity of family planning centers to provide VRLACs, to train and staff providers, and to keep supplies in stock and available for same-day access by patients;

(E) Education and outreach to the public about the availability, effectiveness, and safety of contraception including VRLAC;

(F) Education and outreach to the public to inform women about alternatives to abortion, including adoption services, and the numerous public and private agencies and services that are available to assist women during pregnancy and after the birth of the child;

(G) Compiling a list of the contraceptive methods available for both over-the-counter and directly through pharmacies, as California and Oregon have done; and

(H) Other services the commissioner of health deems necessary to improve access to comprehensive family planning options.

(c) Implementation and the continuation of the program established in this section is subject to the availability of federal funds made available to the state for that purpose.

SECTION 3. The commissioner of health is authorized to promulgate rules to effectuate the purposes of this act. The rules shall be promulgated in accordance with the Uniform Administrative Procedures Act, compiled in title 4, chapter 5.

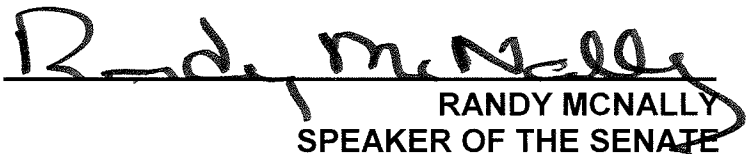
SECTION 4. This act shall take effect upon becoming a law, the public welfare requiring it.

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PASSED: March 22, 2018

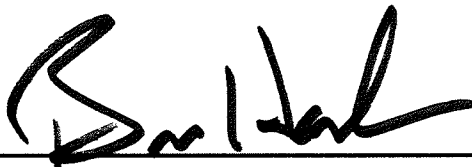


BETH HARWELL, SPEAKER  
HOUSE OF REPRESENTATIVES



RANDY MCNALLY  
SPEAKER OF THE SENATE

APPROVED this 9<sup>th</sup> day of April 2018



BILL HASLAM, GOVERNOR