



Compassionate Assistance for Rape Emergencies (CARE Act)

Included within:
HB 2628
(Zimmermann)
HB 3460
(Williams)

Overview

The CARE Act requires any hospital or health facility that provides emergency care to sexual assault survivors to inform them of the availability of emergency contraception (EC) and dispense EC when requested. These facilities would also be required to provide screening and treatment for sexually transmitted infections (STIs).

Current law requires the Missouri Department of Public Safety to reimburse medical providers for sexual assault forensic examinations, but claims cannot include medical treatment for injuries or health concerns relating directly to a patient's sexual assault. This bill adds a requirement that the Department must reimburse medical providers for medical treatment given to sexual assault survivors including, but not limited to, emergency contraception.

Why is this important?

- Emergency contraception (EC) is a back-up contraceptive method taken up to 5 days after sex, instead of before, to reduce the chance of becoming pregnant.¹
- EC is a time-sensitive medication and must be utilized within 3 to 5 days after intercourse, depending on the EC method provided.¹ Studies have shown EC can be up to 98% effective at preventing pregnancy when taken within 24 hours.²
- Dispensing EC in the hospitals saves survivors additional burdensome trips to healthcare providers and pharmacies.³ It is critical to make it as easy as possible for sexual assault survivors to obtain EC.
- EC works by preventing ovulation (the process where the egg leaves the ovary). If ovulation has occurred or if someone is already pregnant, it will not prevent a pregnancy or harm an existing pregnancy.²
- Emergency contraception (levonorgestrel or ulipristal acetate) are not abortion pills (mifepristone and misoprostol).²
- 17 states plus D.C. currently require hospitals to provide information about EC and dispense upon request in cases of sexual assault.⁴

Sources

1. Emergency contraception. KFF. (2025, January 28). <https://www.kff.org/womens-health-policy/fact-sheet/emergency-contraception/>
2. Morning after pill: What to know. Cleveland Clinic. (2025, January 3). <https://my.clevelandclinic.org/health/treatments/23386-morning-after-pill>
3. Providing emergency contraception to sexual assault survivors. National Women's Law Center. (2022, December 9). <https://nwl.org/resource/providing-emergency-contraception-to-sexual-assault-survivors/>
4. Emergency contraception. Guttmacher Institute. (2025, September 18). <https://www.guttmacher.org/state-policy/explore/emergency-contraception>