

The Impact of Publicly Funded Contraceptive Services on Unintended Pregnancy

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September 19, 2008

Faculty disclosure

- Dr. Finer has no financial affiliations to disclose

Note: Additional disclosure information is located within the program

Learning Objectives

At the conclusion of the session, participants will be able to:

- Describe recent research related to contraception.

Background

- One quarter of U.S. women rely on public funding for contraceptive services
- Past research: In the mid-'90s, publicly funded contraceptive services averted 1.3M unintended pregnancies, 630K abortions and 530K unintended births each year
 - and every \$1 spent on family planning saved \$3 in public costs for pregnancy-related health care

Key research questions

- How many women were able to avoid an unintended pregnancy as a result of the contraceptive services provided by family planning clinics in 2004?
- Of the unintended pregnancies that were avoided, how many would have resulted in an unplanned birth and how many would have resulted in an abortion?

Key research questions

- What were the cost-savings resulting from the contraceptive services provided in family planning clinics?

Key data sources

- *Contraceptive use*: The 2002 National Survey of Family Growth
- *Failure rates*: SES-subgroup-specific 12-mo failure rates from Guttmacher analyses
- *Women served*: Previous estimates
- *Costs*: Title X data on total costs
- *Savings*: Medicaid data on prenatal, delivery, postpartum, and infant care costs

Methods: Pregnancies averted

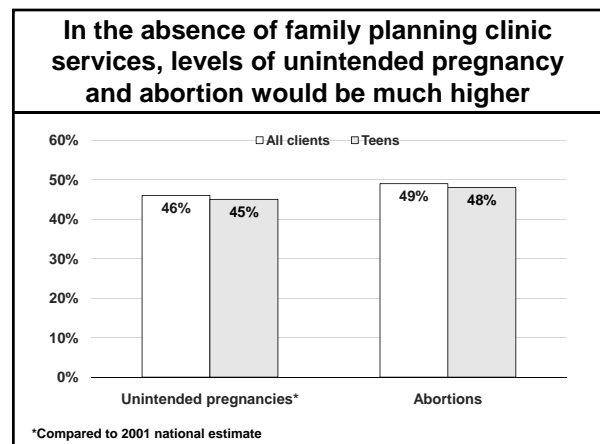
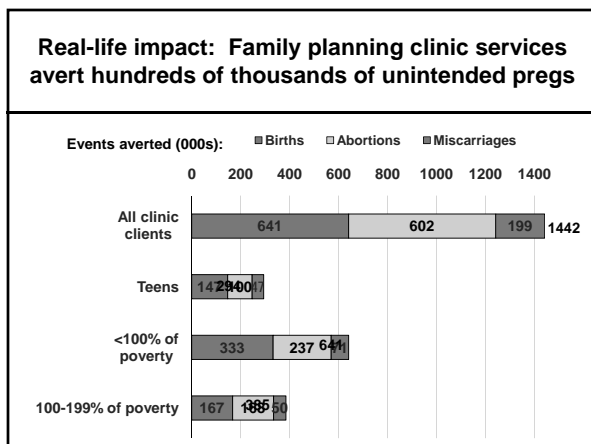
- We examined the contraceptive methods *currently* used by family planning clinic clients, and estimated the number of unintended pregnancies they would have experienced given that method mix
- We considered four *hypothetical* scenarios that might occur in the *absence* of clinic services, and calculated the contraceptive method mix that would result in each case

Methods: Pregnancies averted

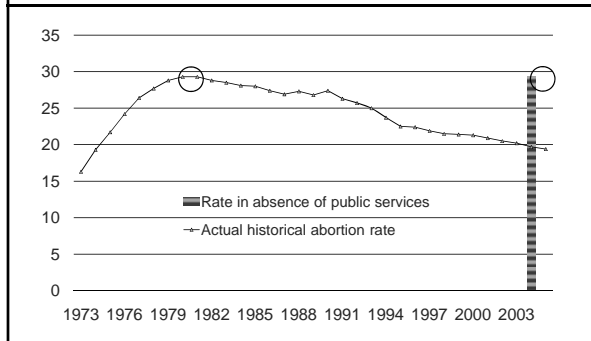
- We estimated the number of unintended pregnancies that women would have experienced under each scenario
- We averaged the scenarios to create our best estimate of pregnancies experienced
- We compared each scenario to the estimated number clients would have experienced given their actual method mix

Scenarios: In the absence of family planning clinic services, women's method mix would shift to that of...

- women who do not currently use public services
- women who were not using public services but would likely need them in the future
- women who had discontinued the pill and shifted to nonprescription methods or no method
- current users of nonprescription methods and nonusers



Absent public services, the U.S. abortion rate would be as high as it has ever been



Title X-funded clinics deliver the majority of the benefits

- Services provided in Title X-funded clinics help women avoid 990,000 unintended pregnancies that would result in
 - 420,000 abortions
 - 440,000 unintended births
 - 130,000 miscarriages
- In the absence of such Title X services, the UP rate in the U.S. would be 32% higher

Unintended pregnancies averted by state

- Largest numbers of unintended pregnancies averted were in the states that served the most women
- CA, TX, NY averted 98,000 to 226,000 pregnancies
- HI, ND, VT, AK, DE averted 3,000-5,000 pregnancies

Methods: Dollars spent/saved

- (Note: only birth costs considered)
- First, how many of the averted births would have been covered by Medicaid?
- Next, how much did it cost to avert those births?
- Next, how much would those births would have cost in terms of prenatal, delivery, and one year of postnatal care?

Substantial savings

	All FP clinics	Title X clinics
Total expenditures	\$1.4 B	\$972 M
Medicaid costs averted	\$5.7 B	\$3.9 B
Net savings	\$4.3 B	\$2.9 B

Every dollar spent to provide contraceptive services in a family planning clinic saves \$4.02

State savings due to public FP services

- 11 states saved more than \$100 million each (CA, TX, NY, MI, WA, FL, GA, OH, IL, MA, TN)
- Most (30) states saved between \$20-100 million
- Even “smallest” states (those that served relatively few women, such as HI, ND, and VT) saved \$8-12 million each

State-level data

- State-level data are available on
 - Unintended pregnancies, births, and abortions averted as a result of the contraceptive services provided by clinics
 - Pregnancies averted at Title X-funded clinics
 - Family planning costs, costs of births averted, and net savings

A few methodological notes

- Cost estimates only include impact of unintended pregnancies prevented; do not include benefits such as STI prevention, diagnosis or treatment, reproductive cancers, etc.
- Estimates do not include services provided by private doctors to Medicaid enrollees

A few methodological notes

- Pregnancies averted are similar to early-'90s estimates, but cost savings have increased, largely because of increases in percent of births that would be Medicaid-eligible
- Calculation of pregnancies averted is based on number of women served (so impact is similar across states); cost varies across states, based on Medicaid costs

Source article

Frost JJ, Finer LB and Tapales A, The impact of publicly funded family planning clinic services on unintended pregnancies and government cost savings, *Journal of Health Care for the Poor and Underserved*, 2008, 19(3): 777–795.

Available on the Guttmacher Institute website:

www.guttmacher.org

**This work was supported by the Office of
Population Affairs, U.S. Department of
Health and Human Services**



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