

Policy Brief: Medicaid Funding

Medicaid Funding for Planned Parenthood Allows Women to Choose IUDs and Implants

Planned Parenthood provides the essential service of contraception to low-income individuals throughout the US, helping women who otherwise couldn't afford birth control to participate in the economy and to have healthy families. Maternal and infant health outcomes are poor in the US compared to other similar countries.^{1,2} Medicaid funding for family planning is a critical piece in services for low-income individuals, and 27 states throughout the US have expanded Medicaid coverage for family planning, including states as varied as Georgia, Louisiana, California and New York.³ These programs allow for social and economic benefits as well as cost-savings from the prevention of unintended pregnancies.^{4,5} Rigorous research points to the benefits of Medicaid funding and Planned Parenthood contraceptive services for women to be able to use certain methods, such as the IUD and the contraceptive implant, which are almost 100% effective in preventing pregnancy.

Medicaid funding and Planned Parenthood contraceptive services give women access to the most effective methods.

A randomized controlled study of 1,500 women seeking care in 40 Planned Parenthood health centers showed that Medicaid funding for family planning doubled the chances that women choose to use an IUD or implant.⁶ In the study over 40% of contraceptive care visits were paid primarily by Medicaid family planning expansion programs. Without coverage, most women are not able to afford these methods that have upfront costs that can be over \$1,000. However, these methods are the most cost-effective over time, both for individual women and for health systems.⁷ When providers in the study received an evidence-based training designed to increase their ability to offer these methods, women in family planning clinics were far more likely to be able to protect themselves from unintended pregnancy.⁸ For the first time in decades, the United States finally was able to reduce the rates of unintended pregnancy, as IUDs and the contraceptive implant became more available to women.⁹

As a 25-year old married white woman in the study with had an educational level of technical or vocational training said, "Birth control has been very important over the past year because I would not be able to keep the job I have and work as hard as I need to if I had a child." She lived in a state with expanded Medicaid funding for family planning.

Sources

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