



Helping More Women Access Long-Acting Reversible Contraceptives

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Introduction and summary

The United States has one of the highest unplanned pregnancy rates among developed countries.¹ Increasing access to contraception helps women plan whether and when to have children, resulting in healthier pregnancies and infants. For many women, the ideal time to start contraception may be immediately after a birth or an abortion. Within Medicaid, however, there are several policy barriers that prevent women from accessing highly effective methods of contraception—long-acting reversible contraception, or LARCs—at these times.

This report delves into why LARCs can be an excellent choice for women following birth and after receiving abortion care but also notes the need for both policymakers and providers to be aware of and sensitive to the history of contraceptive coercion in the United States, especially with regard to women of color. After reviewing general barriers to accessing LARCs postpartum and postabortion, this report offers specific examples of federal and state action and inaction on this matter. It concludes by offering needed legislative and regulatory state and federal policy solutions that should be implemented to improve access to LARCs for all women. Most of these changes can be implemented independent of any legislative action.

Postpartum recommendations:

- While many states have begun to improve LARC access, federal guidance directing how best to promote immediate postpartum placement should be issued to create a national standard.
- Independent of any federal action, states should ensure that providers will be reimbursed for providing LARCs postpartum.

Postabortion recommendations:

- End federal and state restrictions on funding for abortion care under Medicaid, such as the Hyde Amendment, which needlessly complicates the billing process for LARCs.

- Even without lifting funding prohibitions, federal and state guidance should be issued clarifying that LARCs can be provided postabortion without violating these prohibitions and how best to do so.

Training and education recommendations:

- Because of significant provider confusion on who is eligible for LARCs, federal and state training programs should be established to improve understanding.

The choice whether to use birth control of any type is a personal one, but these changes would help ensure that women have greater access to all of their options when making that decision.

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