



### Contraception is a basic health care need.

- 60 million women in the U.S. are currently in their childbearing years, age 15 to 44 on average.
- Of the total number of U.S. women in their childbearing years, 42 million (or 7 out of every 10) are sexually active and do not wish to become pregnant.
- One of the major barriers to universal contraceptive access is the high cost. Costs for supplies alone can run approximately \$360 per year for oral contraceptives; \$180 per year for Depo-Provera; \$450 for Norplant; and \$240 for an IUD.
- A woman who wants two children (the average in the U.S.) will have to use contraception for more than two decades of her life.

### Lack of insurance coverage for contraceptive services is a widespread problem in the United States.

- Half of all indemnity (fee-for-service) insurance plans in the U.S. do not cover any reversible contraception. Only 15 percent of these plans cover all six prescription contraceptive methods - oral contraceptives (The Pill), IUD, Norplant, Depo-Provera, the diaphragm and Lunelle.
- While 97 percent of all traditional indemnity plans cover prescription drugs, only 33 percent cover "The Pill."
- While traditional health maintenance organizations (HMOs) offer the most comprehensive contraceptive coverage, 7 percent do not cover prescription contraceptives and only 39 percent cover all five types.
- Women of reproductive age currently spend 68 percent more in out-of-pocket health care costs than men, and much of this gender gap is due to reproductive health-related costs.

### Full contraceptive coverage in health plans would be inexpensive, popular among health insurance consumers and effective against the cost of pregnancy-related absences.

- Providing full contraceptive coverage in employment-based health care plans would cost employers, at most, only \$21.40 per employee per year. For employers with plans that currently provide no contraceptive coverage, the average cost of adding it -- if employers contributed 80 percent of the cost -- would be \$17.12 per year or \$1.43 per month.
- A recent study calculated that for an average employer, the total indirect cost of pregnancy-related absences per year per 1,000 covered female employees would be \$542,000. It is estimated that the average cost to replace female employees who quit each year due to pregnancy is an additional \$14,000 per employee.
- 73 percent of privately insured adults support full contraceptive coverage in their health insurance plans, even if it would increase their costs by \$5 per month, according to a nationwide poll conducted by the Kaiser Family Foundation.

### Increasing the availability and affordability of contraceptives can help reduce this nation's high rate of unplanned pregnancies.

- For nearly 3 million women, or 50 percent of all women who become pregnant each year in the U.S., pregnancy is an unplanned and often unwanted occurrence in their lives.
- Unplanned pregnancies lead to 1.4 million abortions and another 1.2 million births every year in the U.S.

### Contraception is also a critical contributor to improved children's health.

- The U.S. has alarmingly high infant mortality and low-birth weight rates, both of which are associated with unintended conception.
- Women who experience unintended pregnancies are less likely than other women to receive adequate prenatal care, resulting in greater risks to their health and poorer birth outcomes.

Sources: Alan Guttmacher Institute; Institute of Medicine, National Academy of Sciences; William M. Mercer Inc.; and Planned Parenthood Federation of America.