

Family Planning Update on Issues and Trends

Prepared for
Region IV Family Planning Directors' and Training Coordinators Meeting
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by
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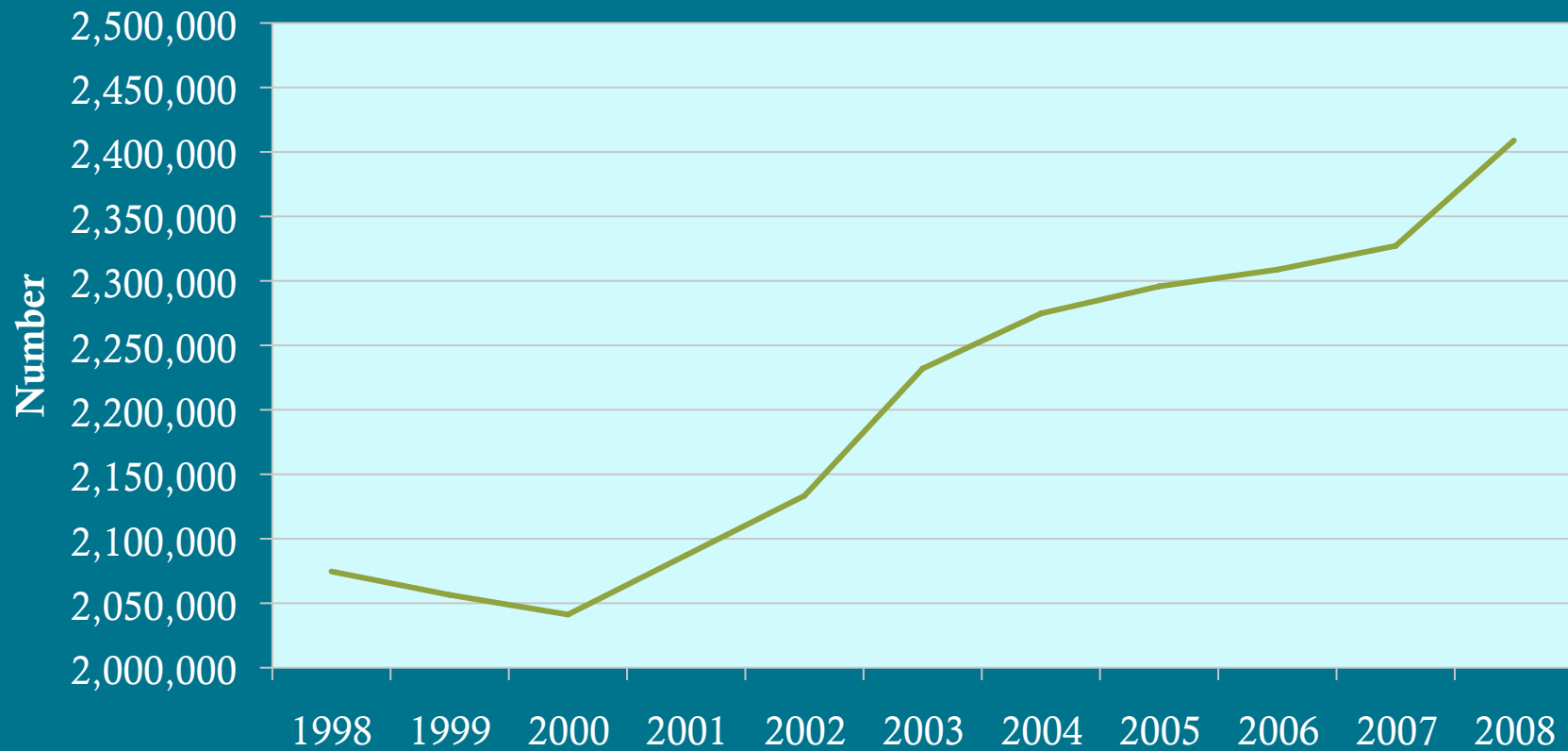
How Are We Doing?

- Meeting the Need: Title X
- Availability of Resources
- Consequences of Unmet Need
- Health Care Reform Update

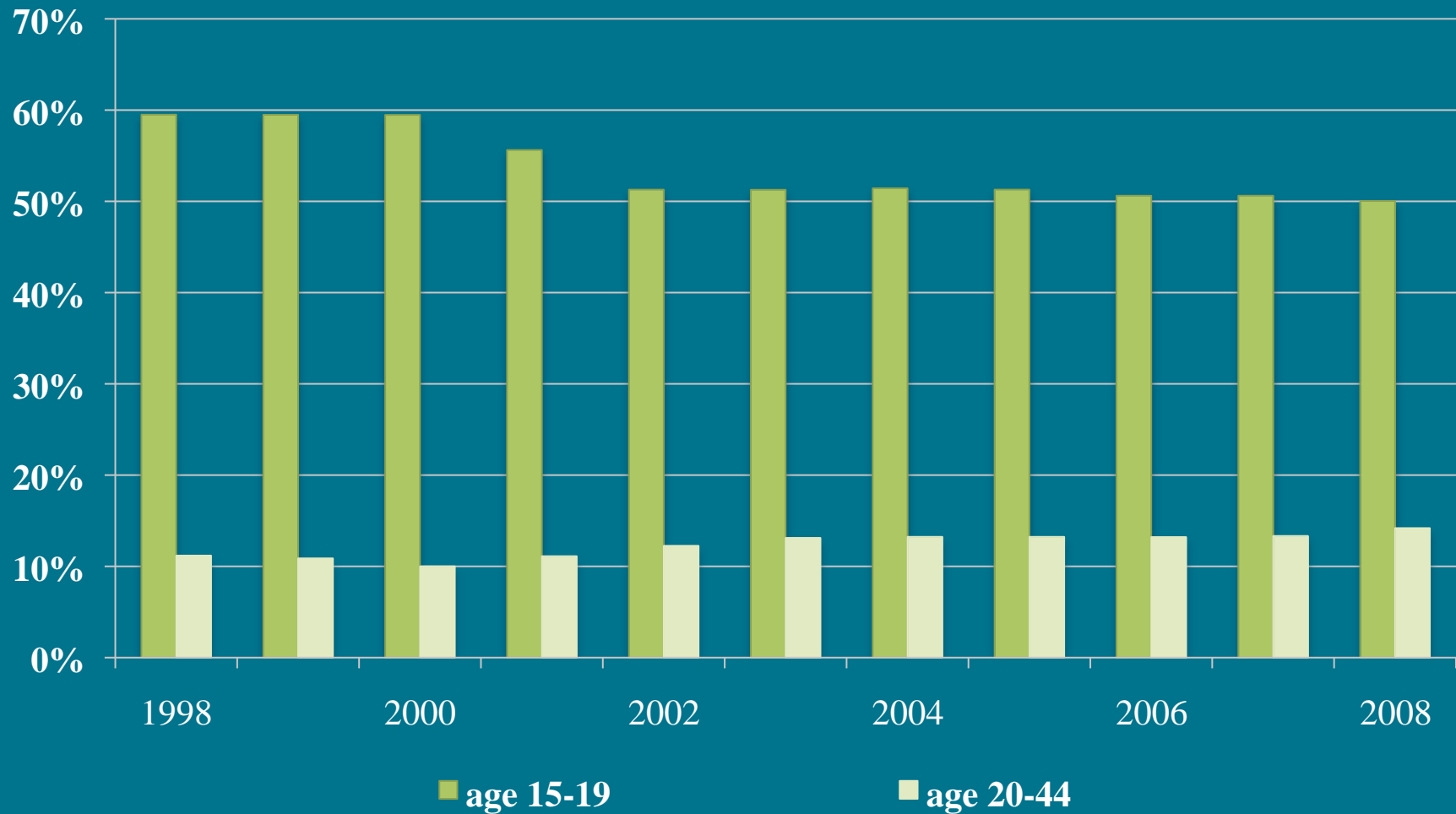
Trends in Rates and Disparities:

- In-need Population
- Numbers Served
- Need met
- Unmet Need
- Consequences of Unmet Need
 - Increased Unintended Pregnancy
 - Abortion
 - Rapid Repeat Pregnancy
 - Short Birth Intervals
 - STDs/RTIs
 - Unhealthy Pregnancies
 - Poor Birth Outcomes

Women in Need of Publicly Funded FP Region IV 1998--2008



Ten-Yr Trend: Women In Need of Publicly Funded FP Services Region IV 1998 - 2008



Title X FP Users (in thousands) < 150% FPL by Race Region IV 1999-2009

STATES	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
Alabama	81	80	81	92	86	89	86	87	94	99	105
Florida	112	108	127	178	188	194	198	160	206	209	206
Georgia	142	144	148	159	133	158	150	149	140	140	127
Kentucky	102	102	93	95	98	99	100	98	92	89	92
Mississippi	92	81	97	100	94	74	67	59	58	59	61
North Carolina	115	116	132	125	127	124	128	129	106	109	118
South Carolina	108	106	100	102	103	100	96	94	89	92	92
Tennessee	89	85	94	96	89	93	93	104	108	108	112
Region IV	842	822	871	948	918	931	919	879	893	905	913

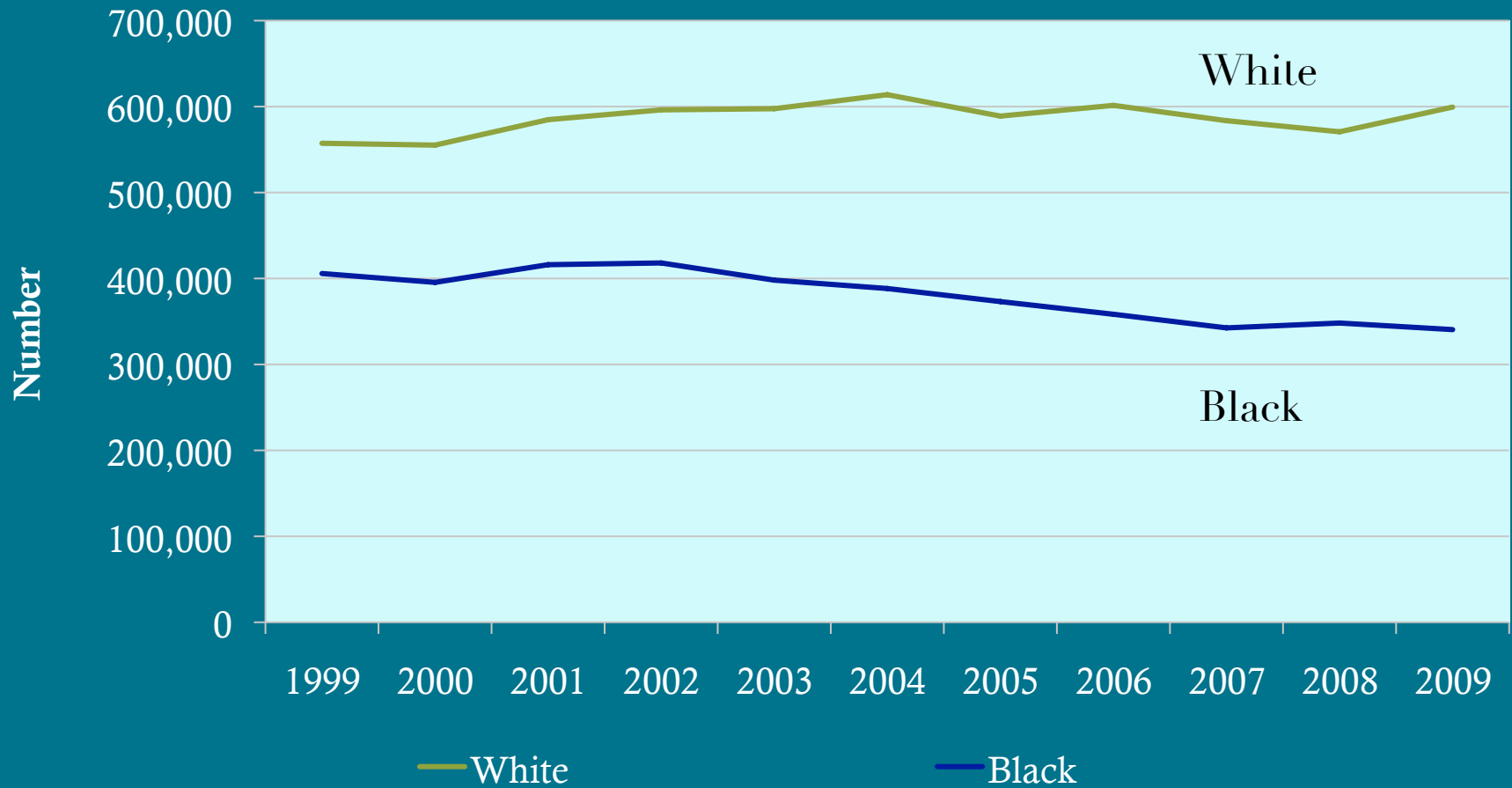
Region IV Clients served (6 years)

- 2005 clients served 1,052,025
- 2006 clients served 1,051,330
- 2007 clients served 1,018,656
- 2008 clients served 1,019,264
- 2009 clients served 1,010,012**
- 2010 clients served

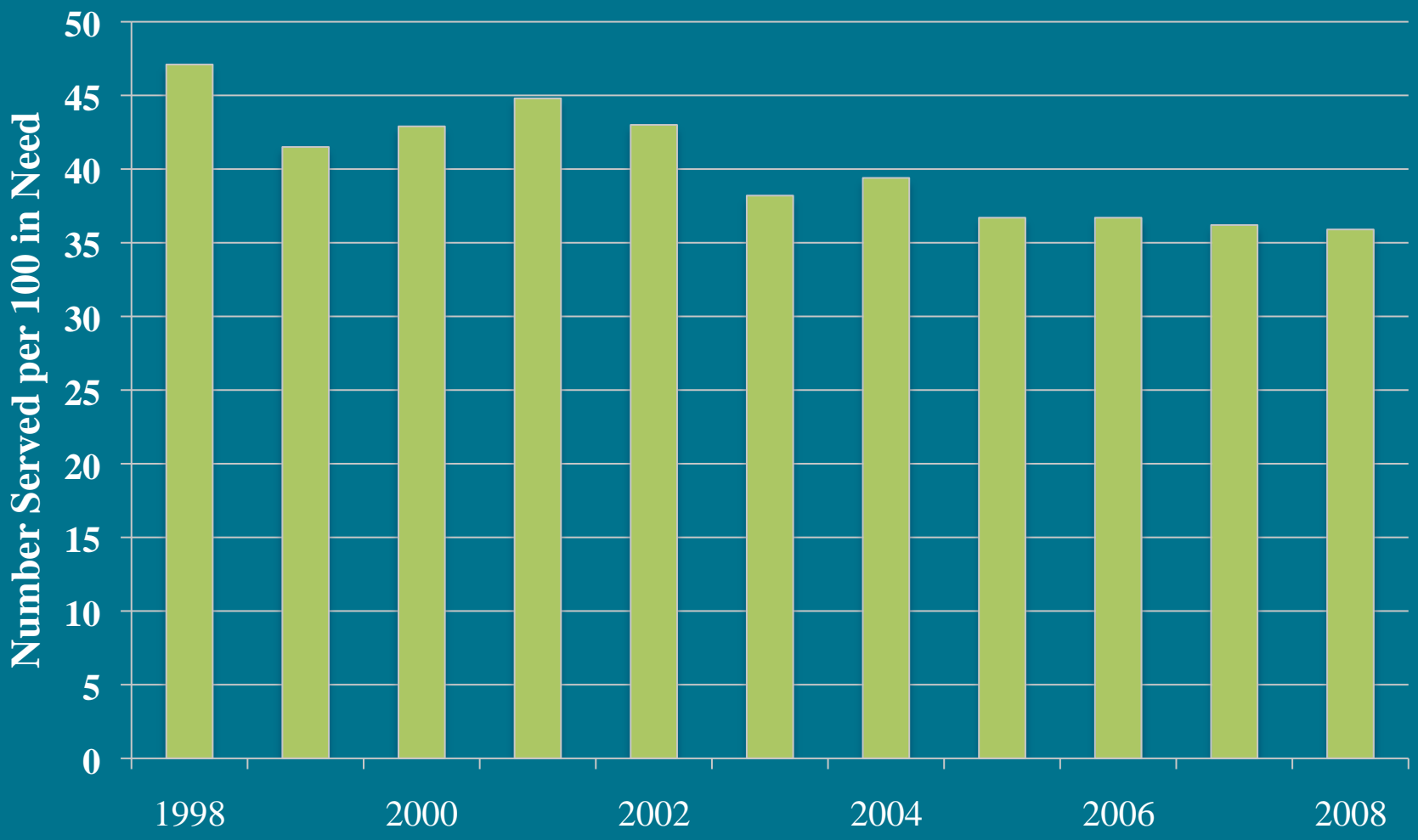
Change in # Title X Users by Race-Ethnicity Region IV States 2005-09

- White: + 10,488 users 1.8% increase
- Black: - 32,602 users 8.7% decrease
- Latino: +28,413 18.5% increase
- Total: - 42,013 4.0% decrease

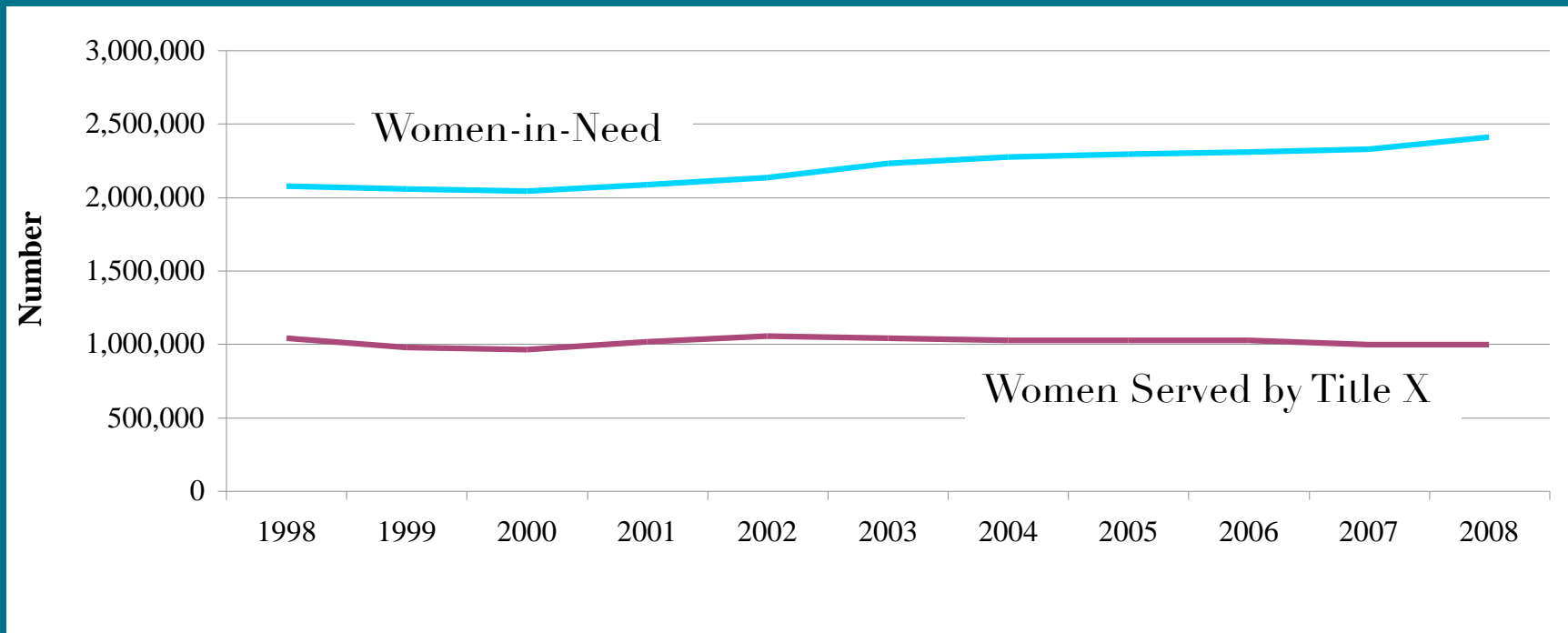
Title X FP Users by Race in Region IV FPAR Data, 1999-2009



Ratio of Women Served by Title X to Number of Women In Need of Publicly Funded Family Planning Services, Region IV



Estimated Number of Women (Age 15-44) In Need of Publicly Funded Family Planning Services And Number of Women Served by Title X Clinics, Region IV, 1998-2008



- W-I-N numbers going up
- Numbers served through Title X fairly constant over time
- Gap in need being met by Medicaid? Or not at all?
- Look at indicators of effectiveness to decide

What About Our Resources Over Time?

- Title X Funding History
- Title X Dollars per Woman in Need, Over Time
- Revenue Sources, Region IV and US
- Mix of Title X, Medicaid, Private, Uninsured

Title X Dollars per Woman in Need 1999-2009

STATES	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008
Alabama	\$95	\$91	\$94	\$95	\$138	\$140	\$137	\$124	\$117	\$159	\$203
Florida	\$71	\$62	\$51	\$66	\$67	\$75	\$88	\$76	\$87	\$93	\$93
Georgia	\$58	\$64	\$63	\$68	\$52	\$54	\$42	\$52	\$47	\$47	\$42
Kentucky	\$104	\$102	\$88	\$95	\$99	\$100	\$100	\$101	\$100	\$115	\$98
Mississippi	\$76	\$89	\$74	\$74	\$73	\$99	\$79	\$60	\$71	\$87	\$88
North Carolina	\$89	\$98	\$99	\$97	\$92	\$92	\$92	\$94	\$121	\$130	\$140
South Carolina	\$131	\$127	\$142	\$145	\$148	\$133	\$136	\$109	\$86	\$81	\$80
Tennessee	\$54	\$54	\$56	\$59	\$61	\$65	\$63	\$64	\$73	\$70	\$60
Region IV	\$79	\$79	\$76	\$82	\$83	\$87	\$88	\$82	\$87	\$95	\$96

Region IV five year funding history

- 2007 \$55,361,530
- 2008 \$55,361,530
- 2009 \$57,023,530
- 2010 \$58,551,500
- 2011 \$60,300,320
- 2012 \$ (Edie has these?)

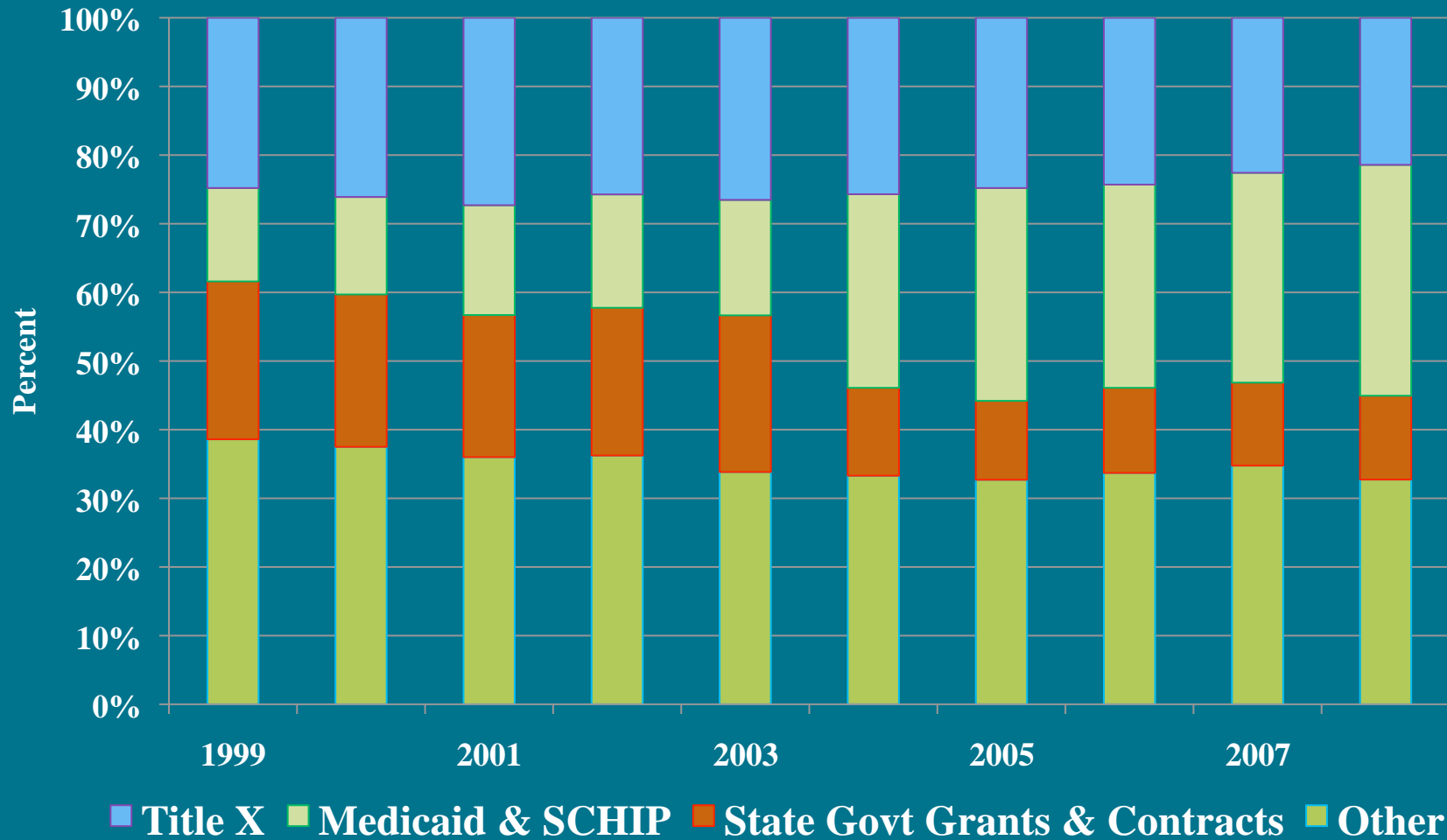


National Title X Funding History: Key Years

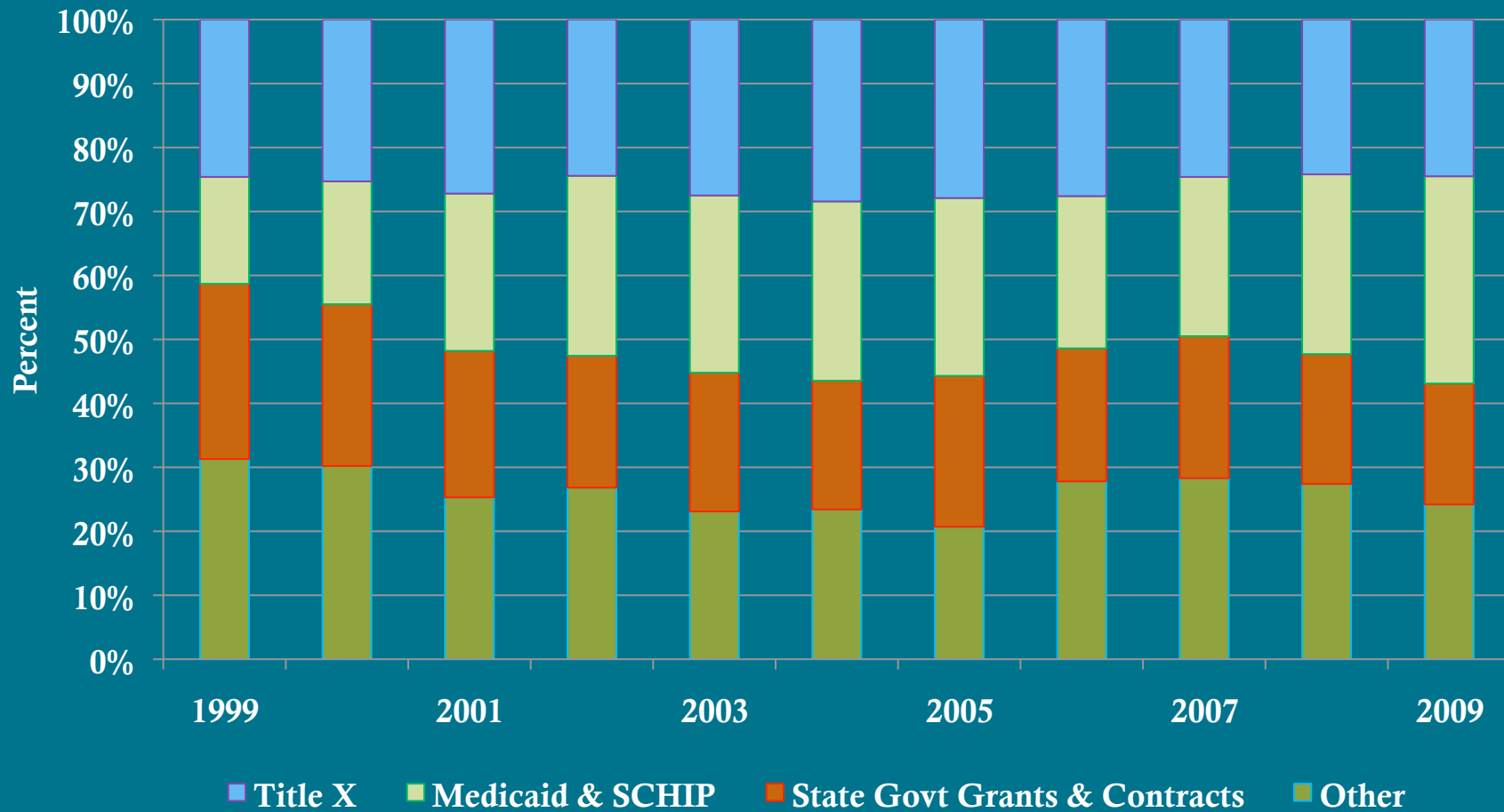
- 1971 \$ 6,000,000
- 1981 \$161,671,000
- 1983 \$124,088,000
- 1991 \$144,311,000
- 2001 \$253,932,000
- 2002 \$265,000,000
- 2005 \$285,963,000
- 2007 \$283,146,000
- 2008 \$299,981,000
- 2009 \$307,491,000
- 2010 \$317,491,000
- 2011 \$327,491,000
- 2012 \$ (Edie has these figures?) *



Family Planning Program Revenue Sources United States 1999 - 2008

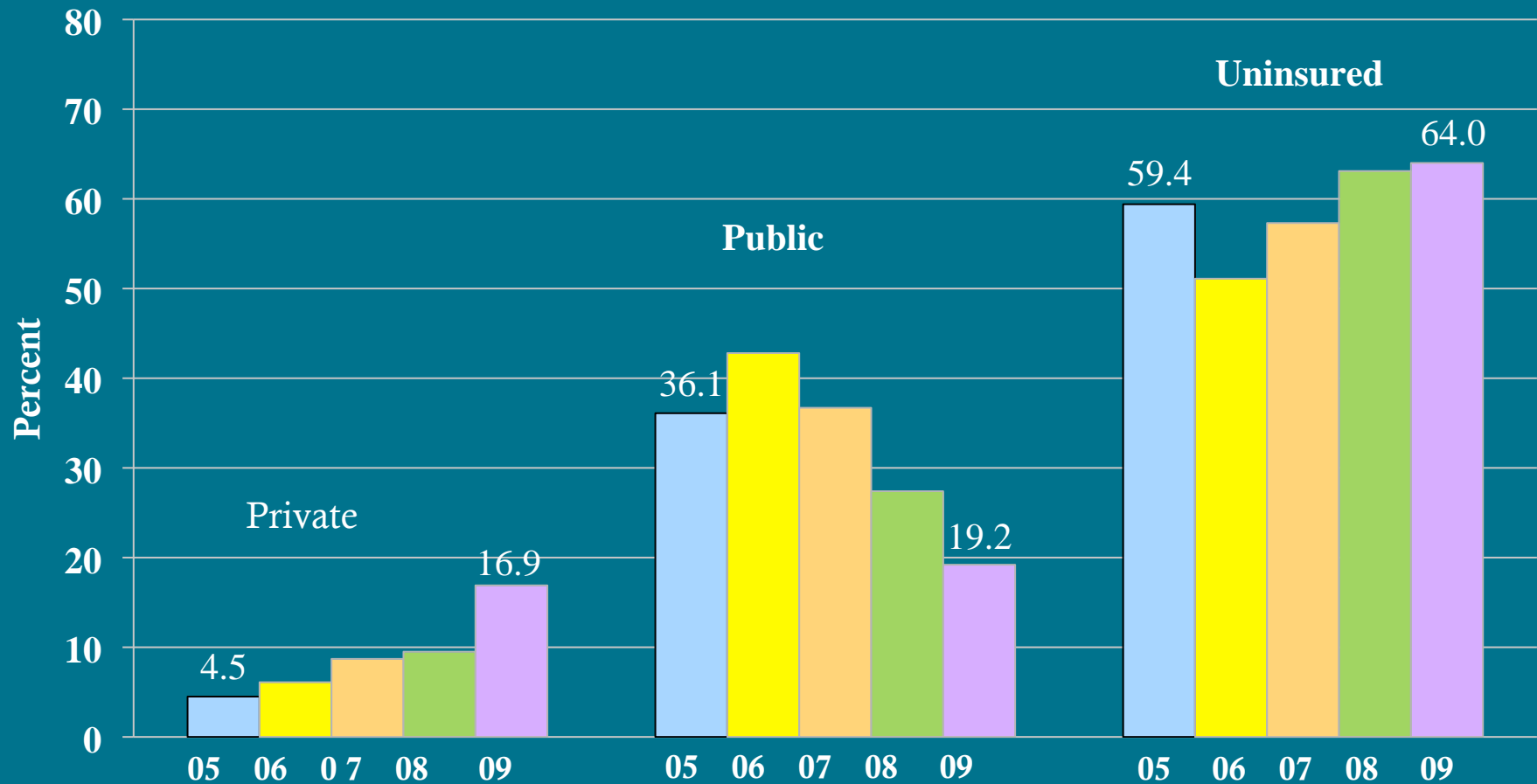


Family Planning Program Revenue Sources Region IV 1999 - 2009



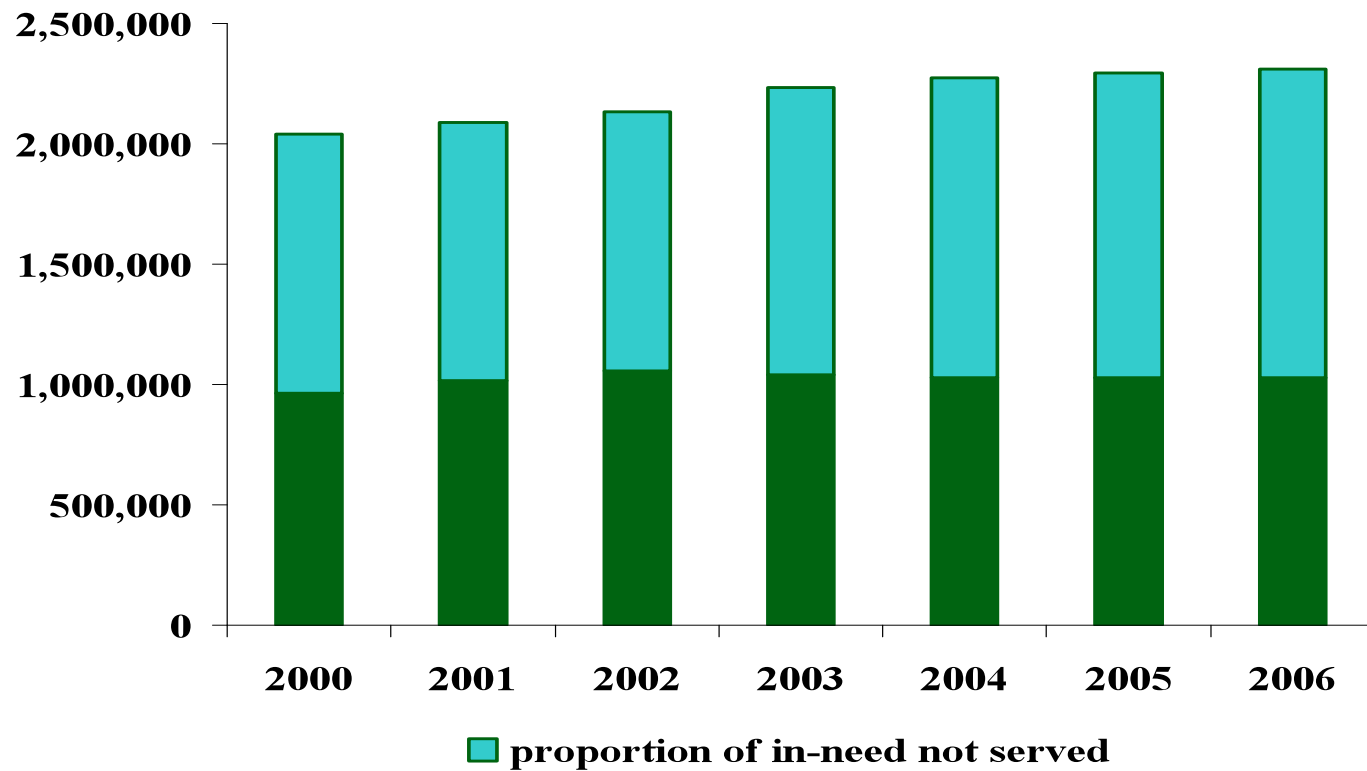
Title X Users by Insurance Status

Region IV 2005 - 2009



Rates shown exclude those with unknown insurance status

Region IV Title X Users In-Need and Not Served 2000-2006

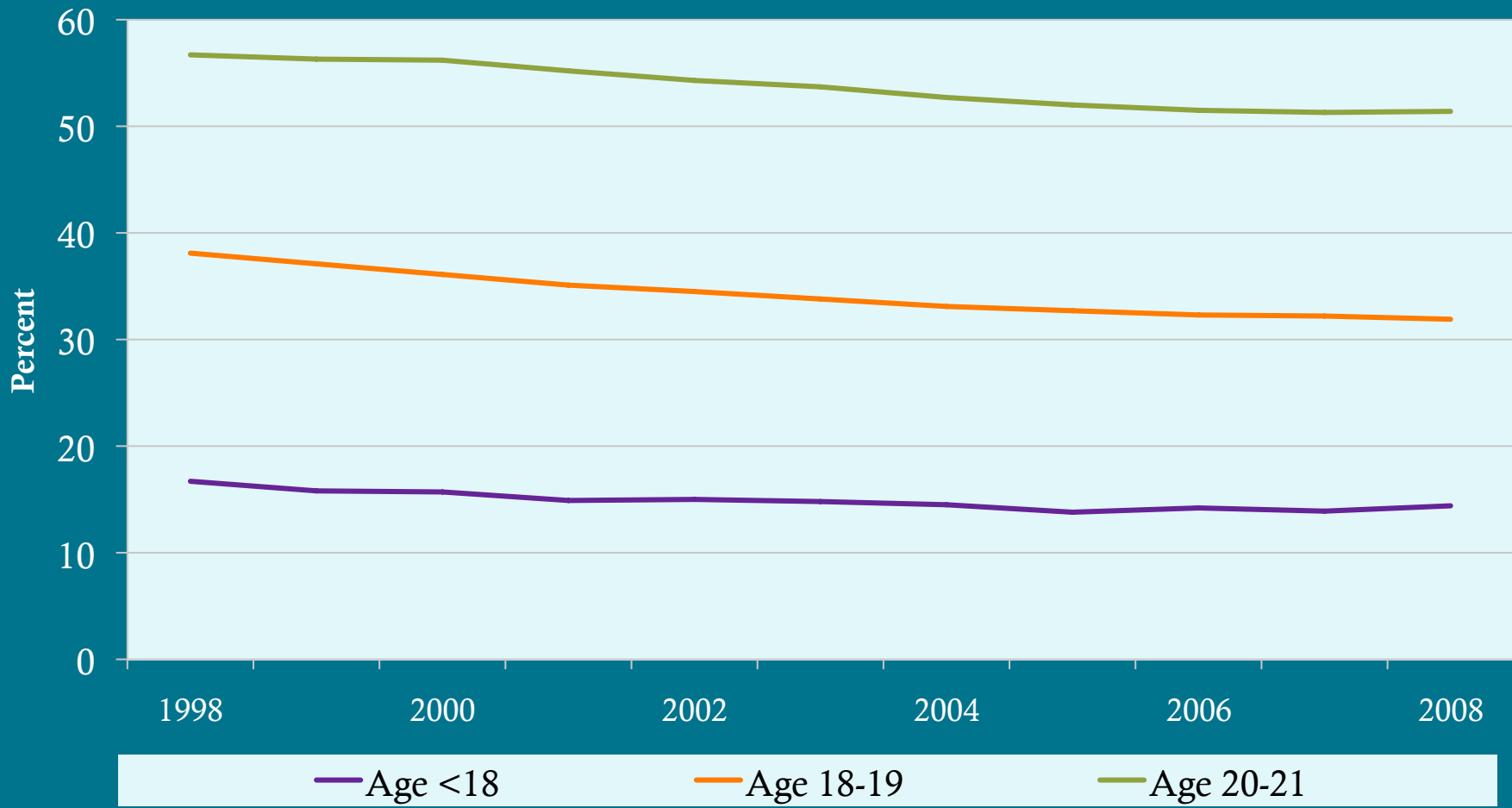


Consequences of “Not Meeting the Need” in our Region

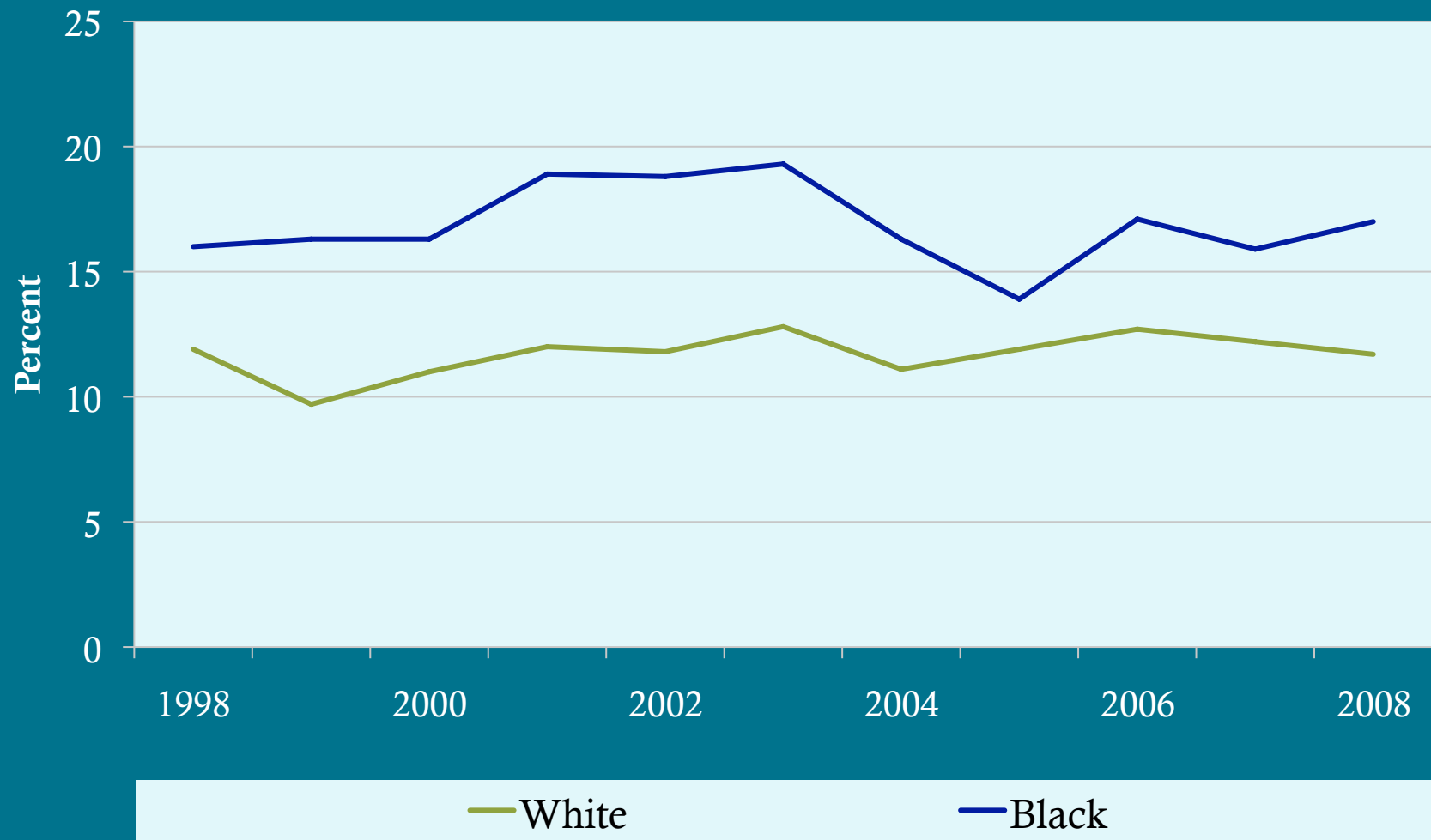
- Unintended Pregnancy
- Rapid Repeat Pregnancy
- Abortion
- Infection (RTIs, HIV)
- Preterm Delivery
- Repeated (Serial) Preterm Deliveries
- Increased Hospital Costs

Repeat Pregnancies in the Early Childbearing Years

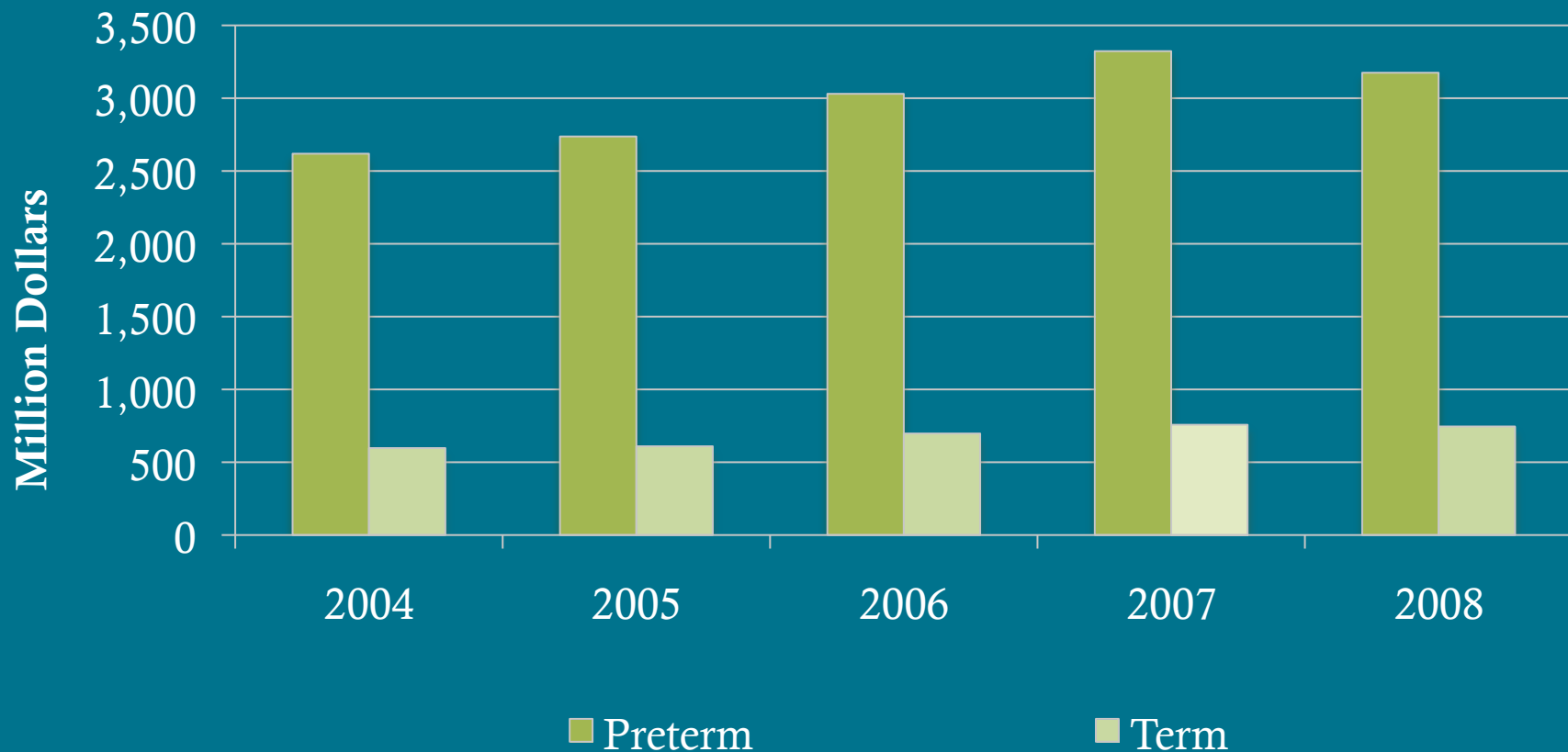
Live Births and Fetal Deaths that were Rapid Repeat Pregnancies (%)



Estimated Births to Women with Previous Preterm Birth



Estimated Hospital Charges for Region IV Preterm and Term Live Births

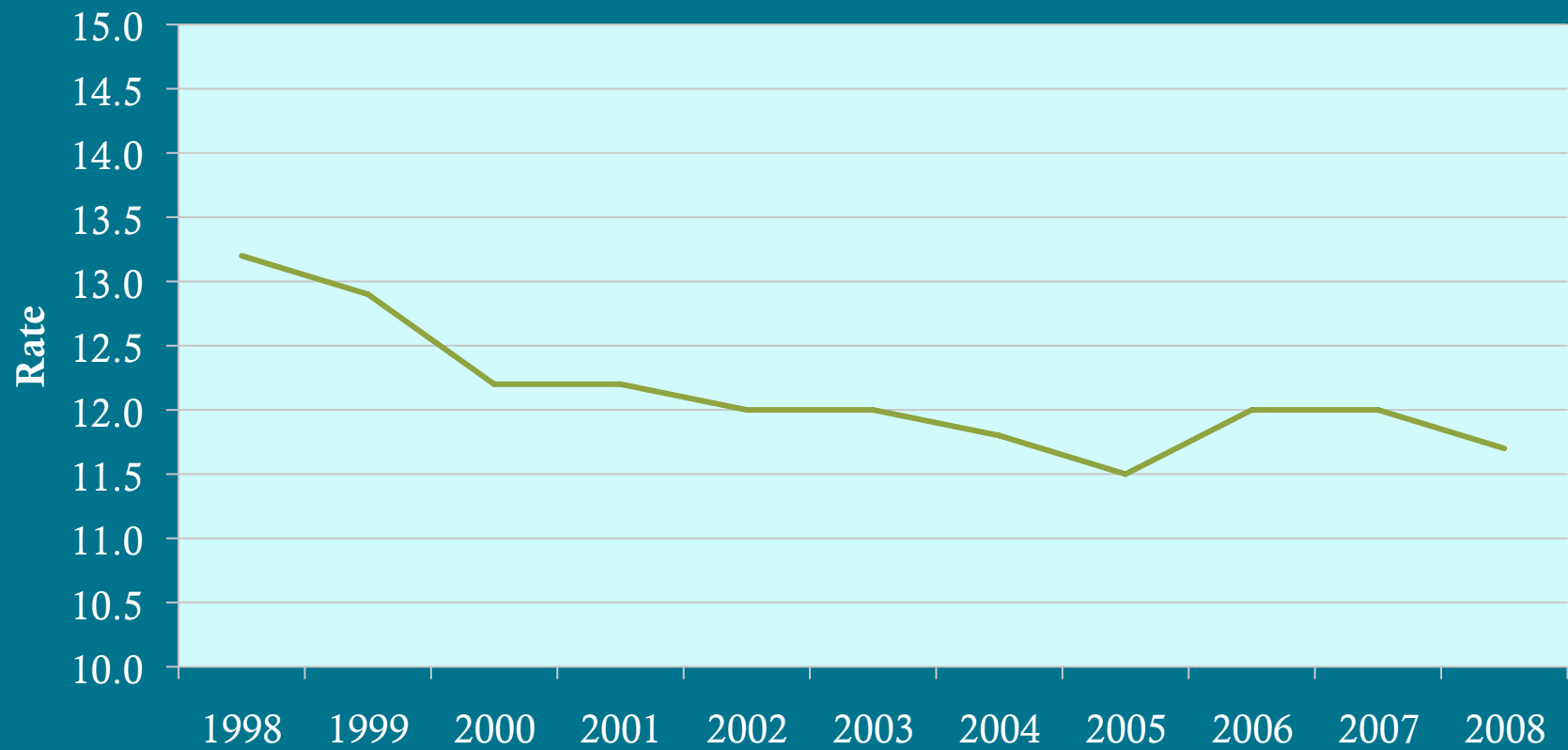


Average charges for NC births in hospitals applied to Region IV Live Births by GA

Induced Abortion Rate for Women 15-44 years

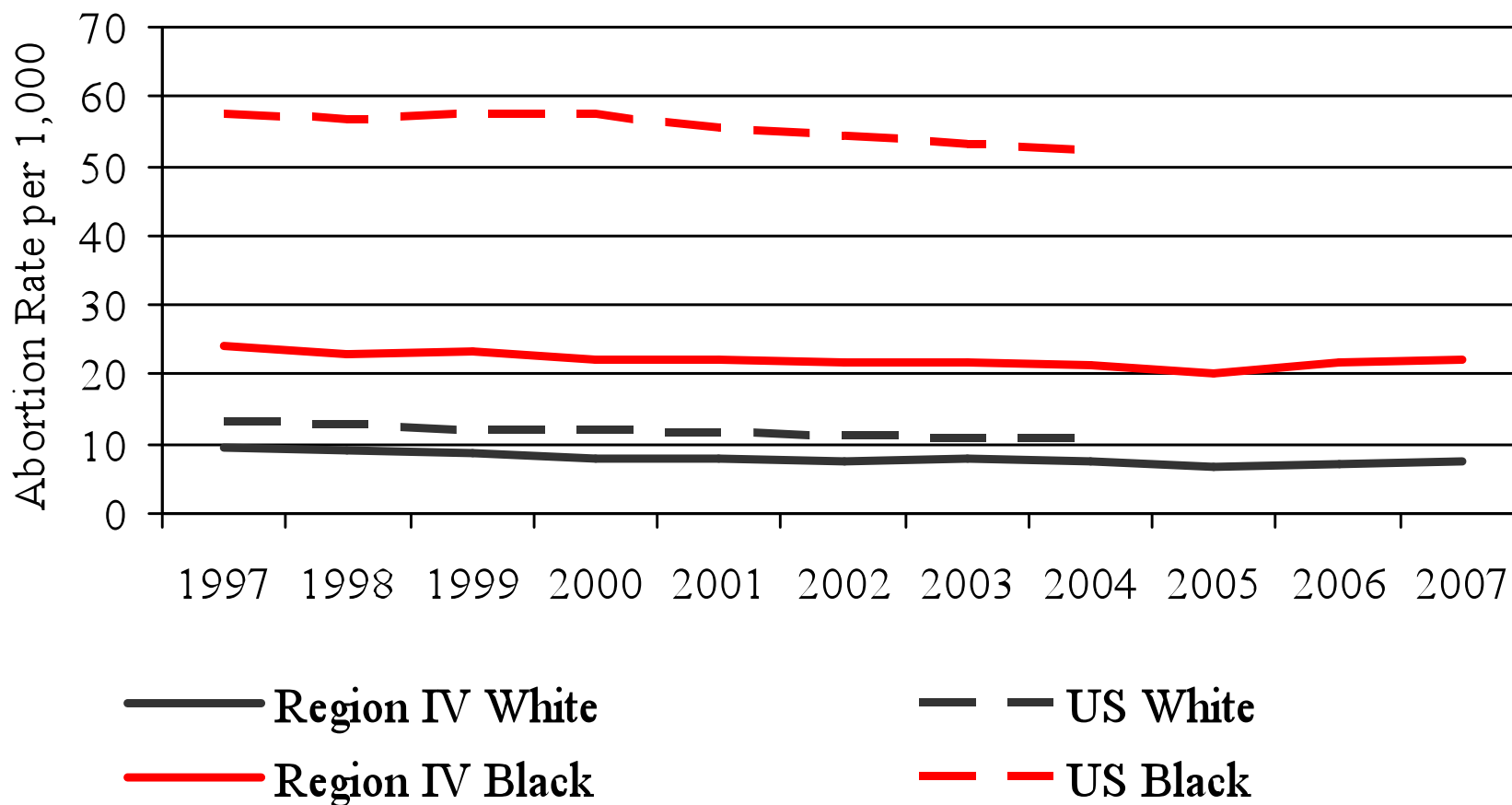
Region IV 1998-2008

(# Abortions / # women) x 1000

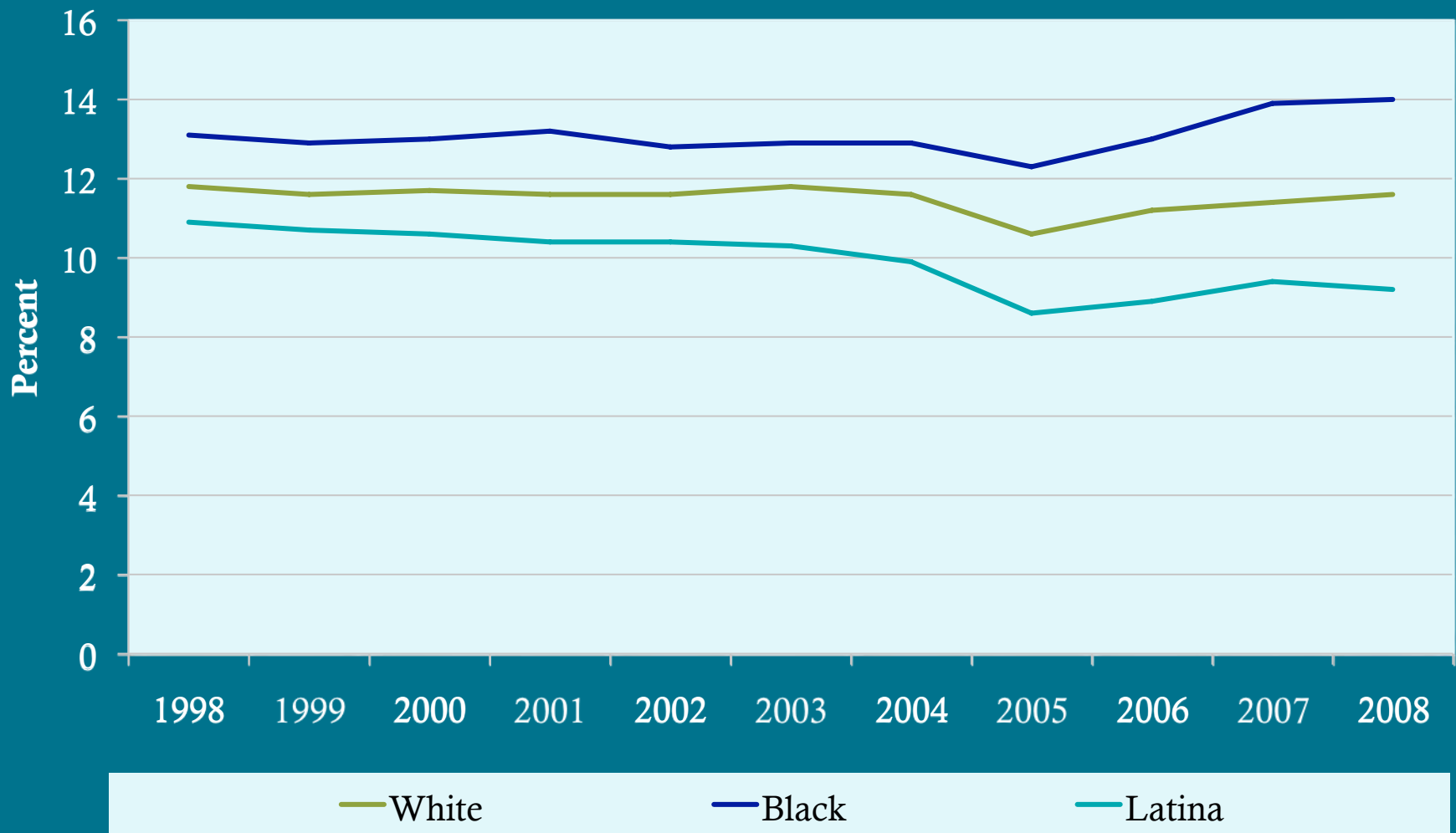


How Does Region IV Compare with US Total?

Induced Abortion Rate (Age 15-44) per 1,000



Indicator of Unmet Need: Rates of Short Birth Interval New Pregnancy within 6 Months of Previous Delivery



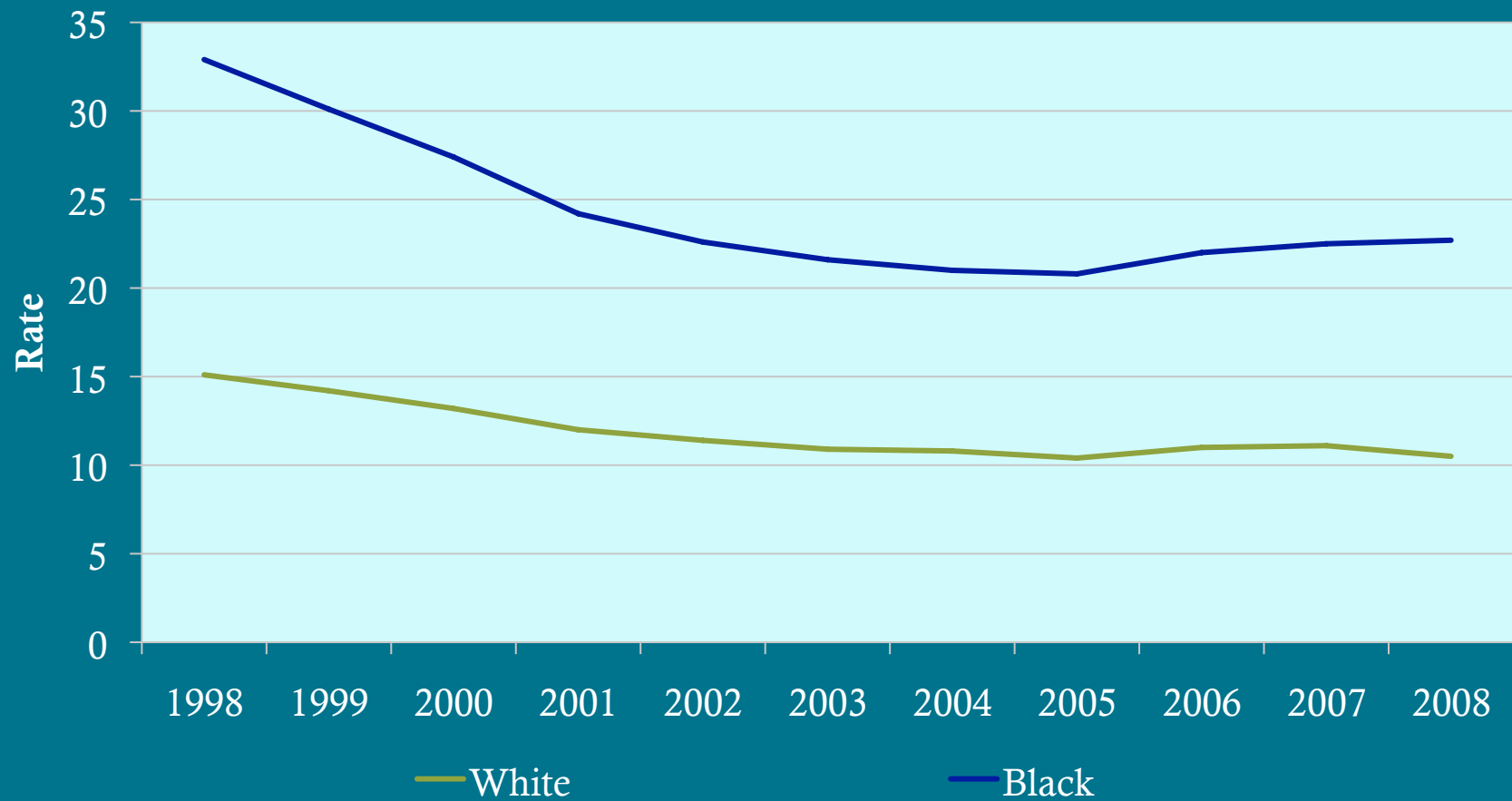
Indicator of Unmet Need: Declining Rates of Healthy (2-5 yr) Spacing

Optimal Birth Interval Rates in Region IV

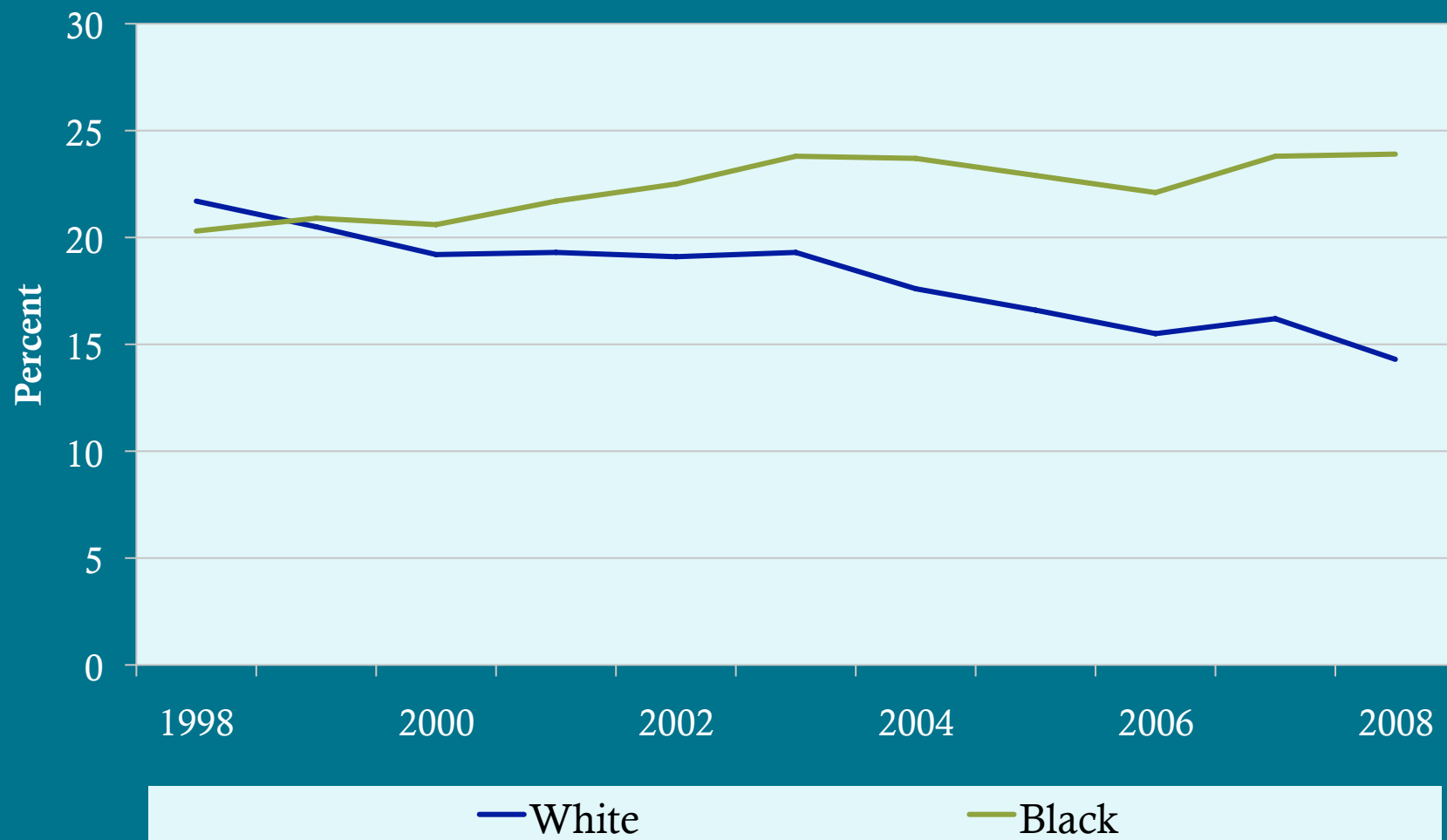
1998-2008



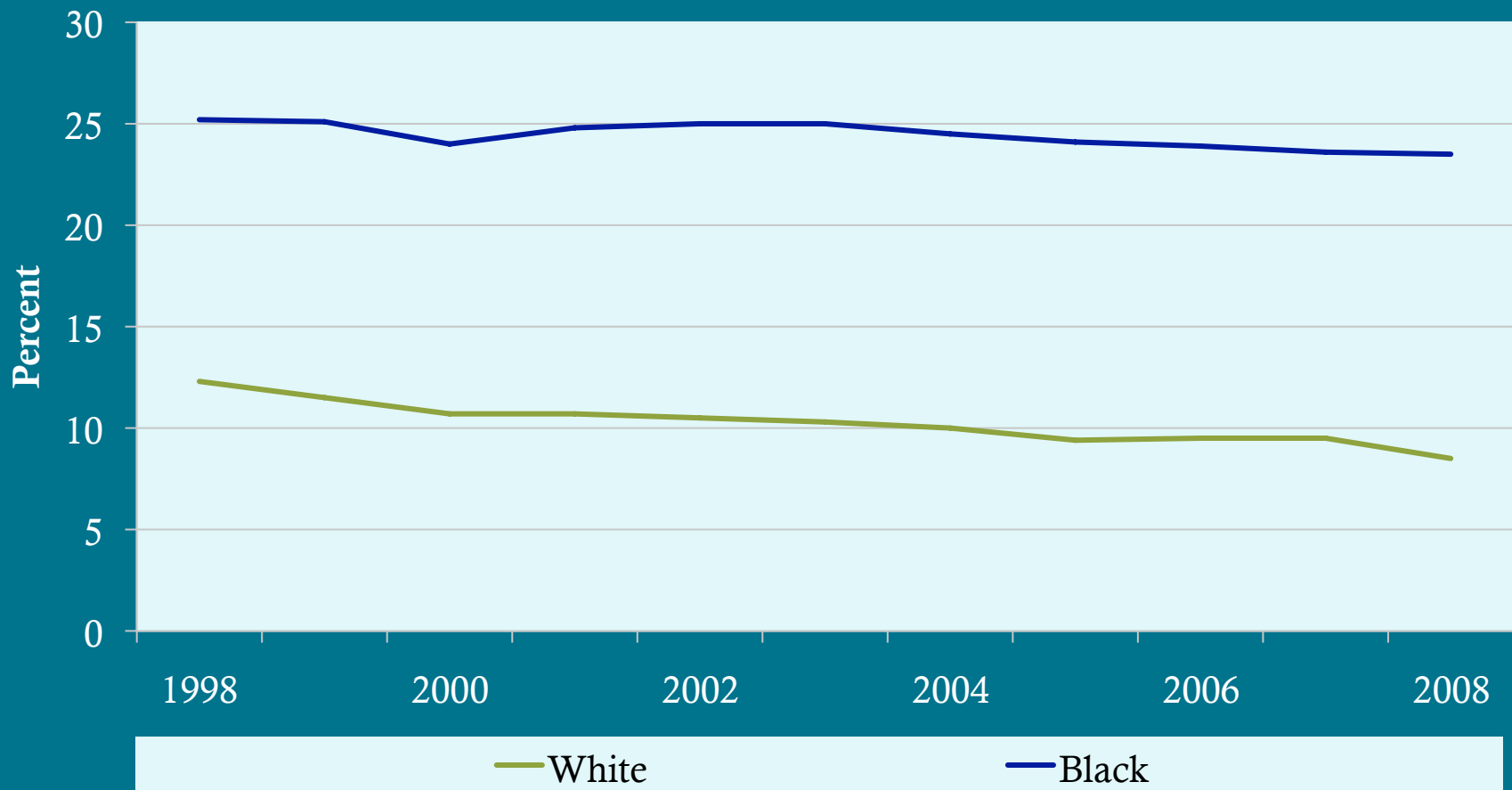
Teen Pregnancy Rates by Race in Region IV 1998-2008



What % of Teen (< 18 yrs) Pregnancies are Aborted?

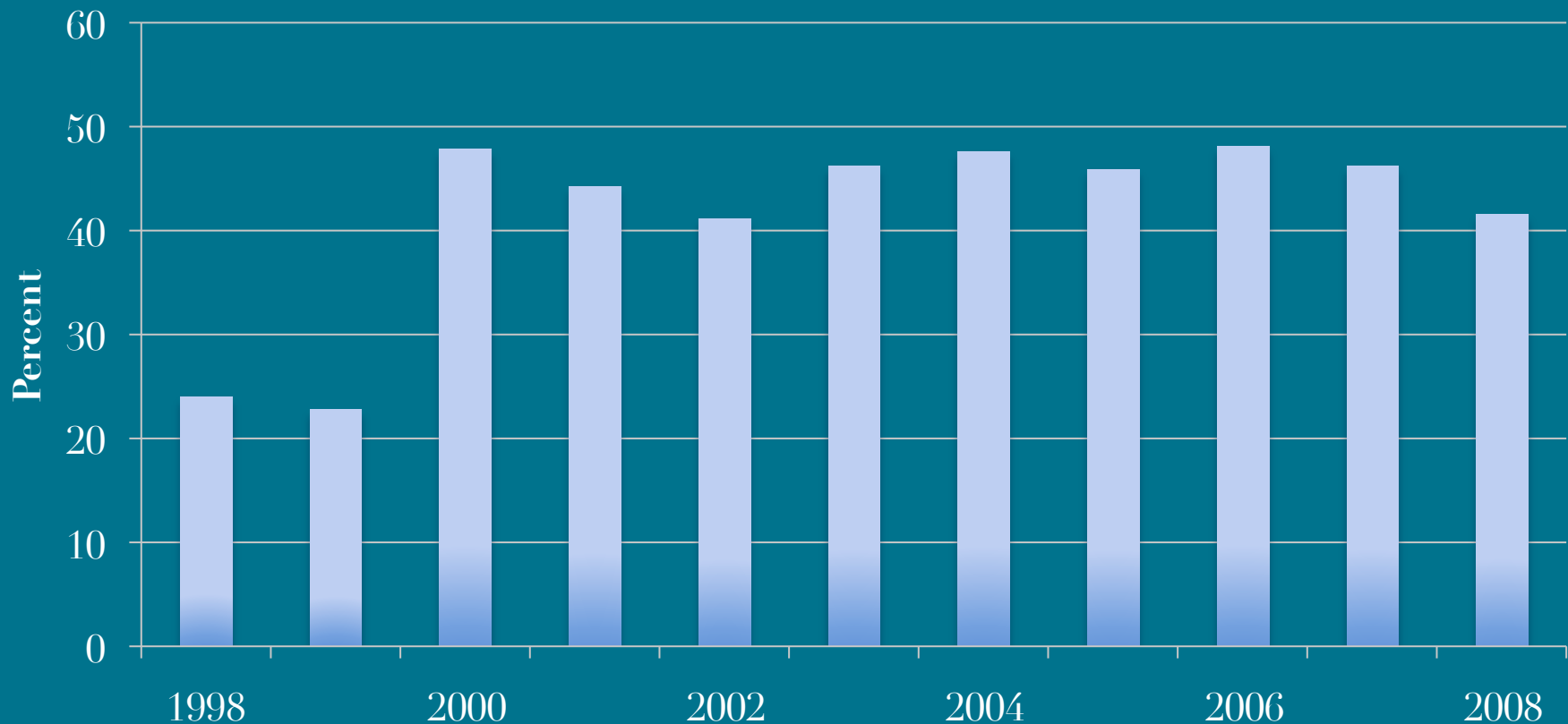


Fraction of Adult Pregnancies Ending in Abortion (Age 18+)



Method Failure: What are Trends in Our Region?

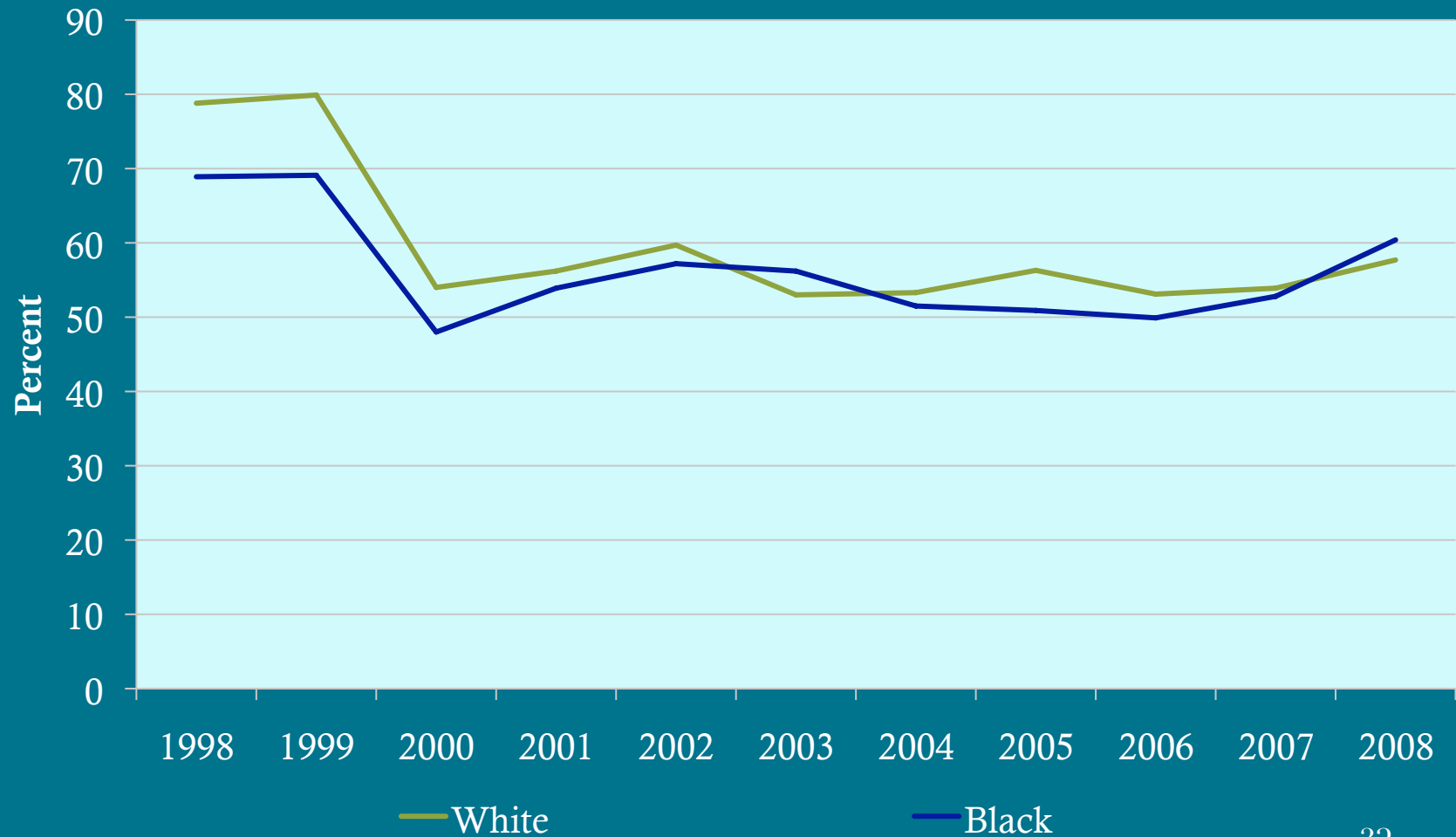
Estimate of Women With a Live Births Using a Contraceptive Method at the Time of Pregnancy
Region IV



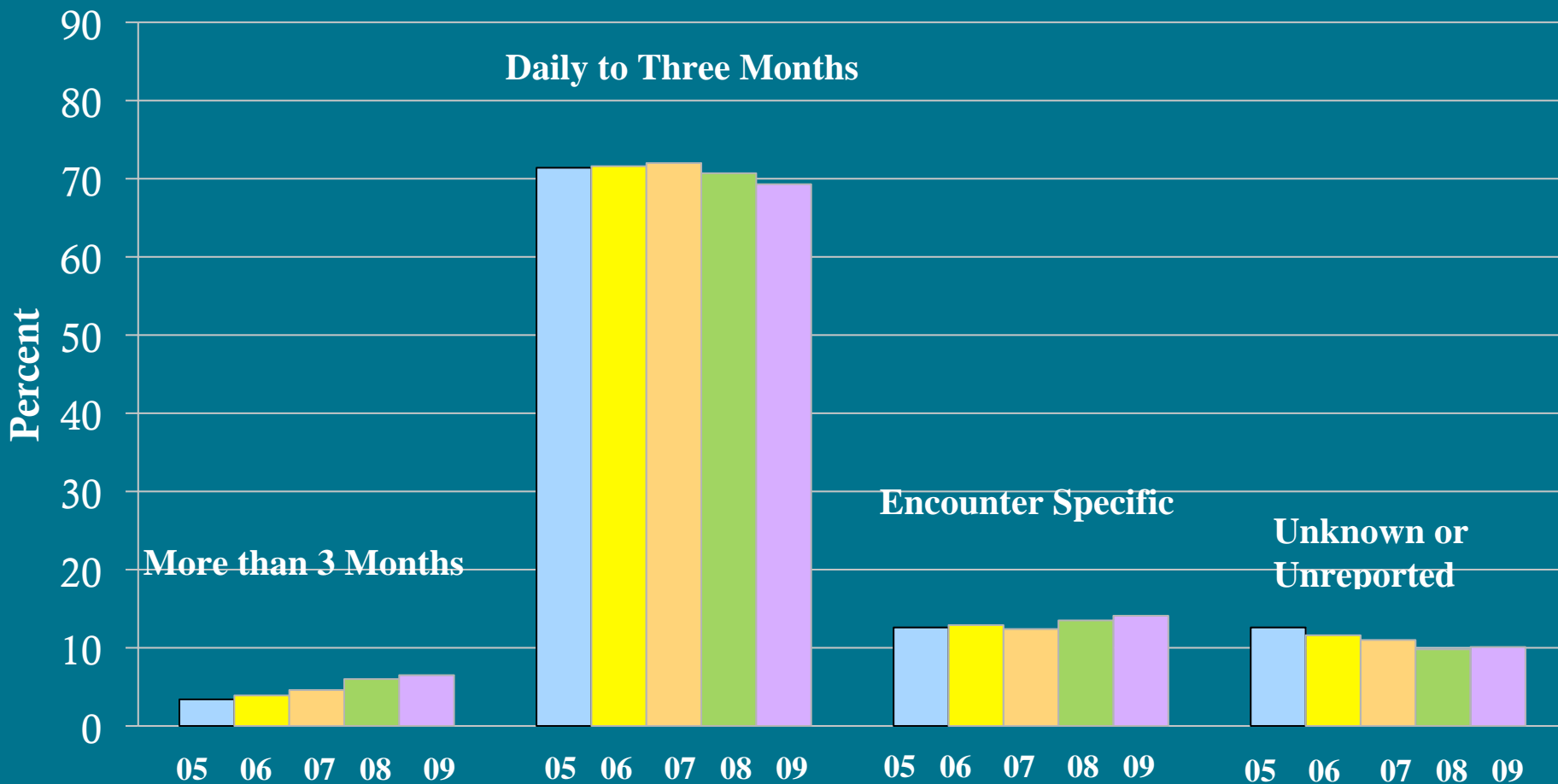
PRAMS Data: 1998 - 2008

Region IV

Women Not Trying to Become Pregnant (**but**) Using No Contraception
PRAMS 1998-2008



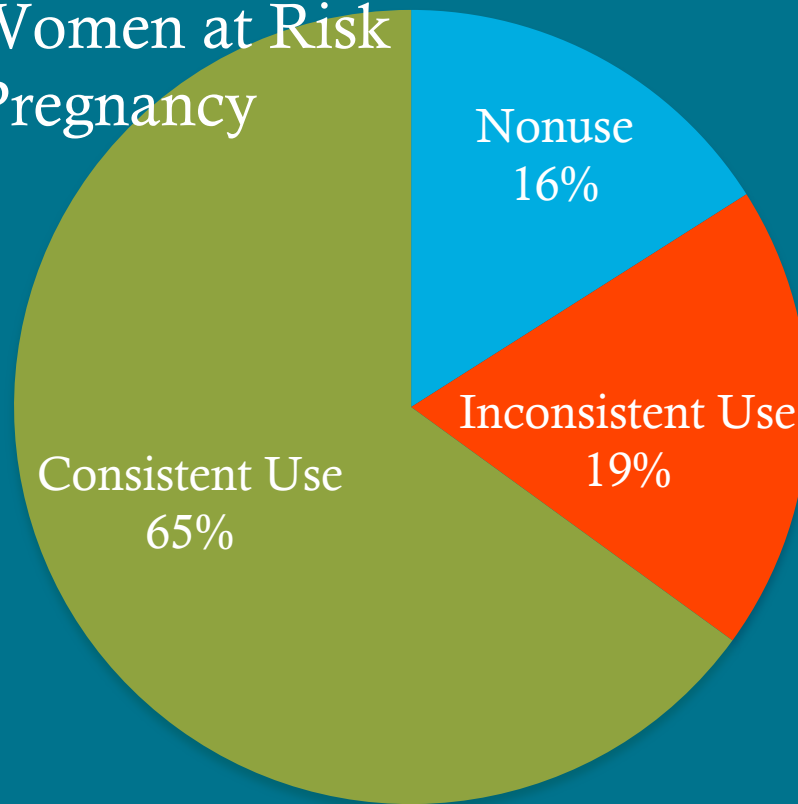
Female Title X Users by Contraceptive Method Mix Region IV 2005 - 2009



Rates exclude women who were using no method, pregnant or seeking pregnancy.

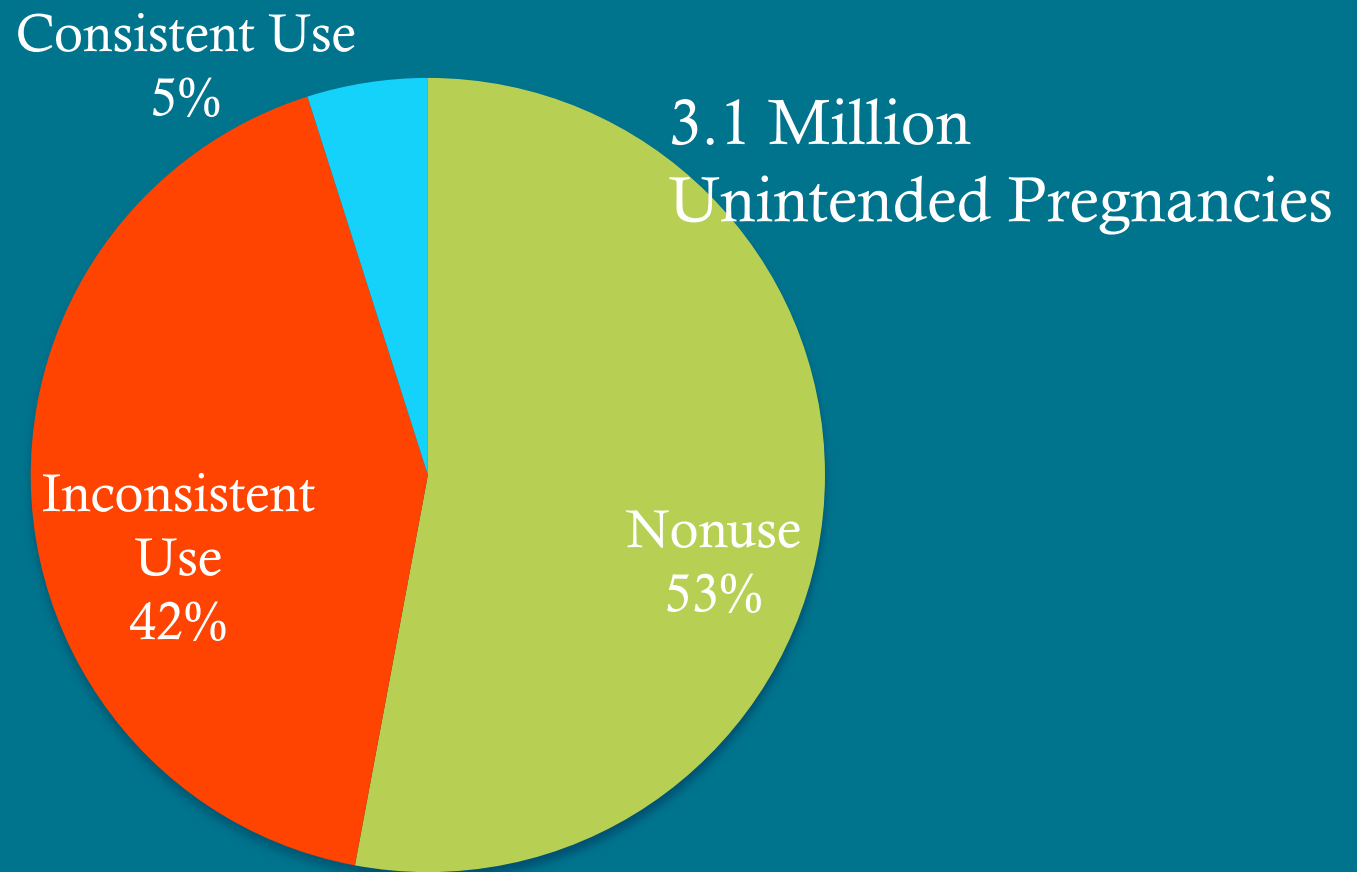
Consistency of Contraceptive Method Use All Year, 2002

43 Million US Women at Risk of Unintended Pregnancy



Gold RB, Sonfield A, Richards CL, Frost JJ. Next Steps for America's Family Planning Program: Leveraging the Potential of Medicaid and Title X in an Evolving Health Care System. New York: Guttmacher Institute, 2009

Consistency of Contraceptive Method Use Month before Conception, 2001

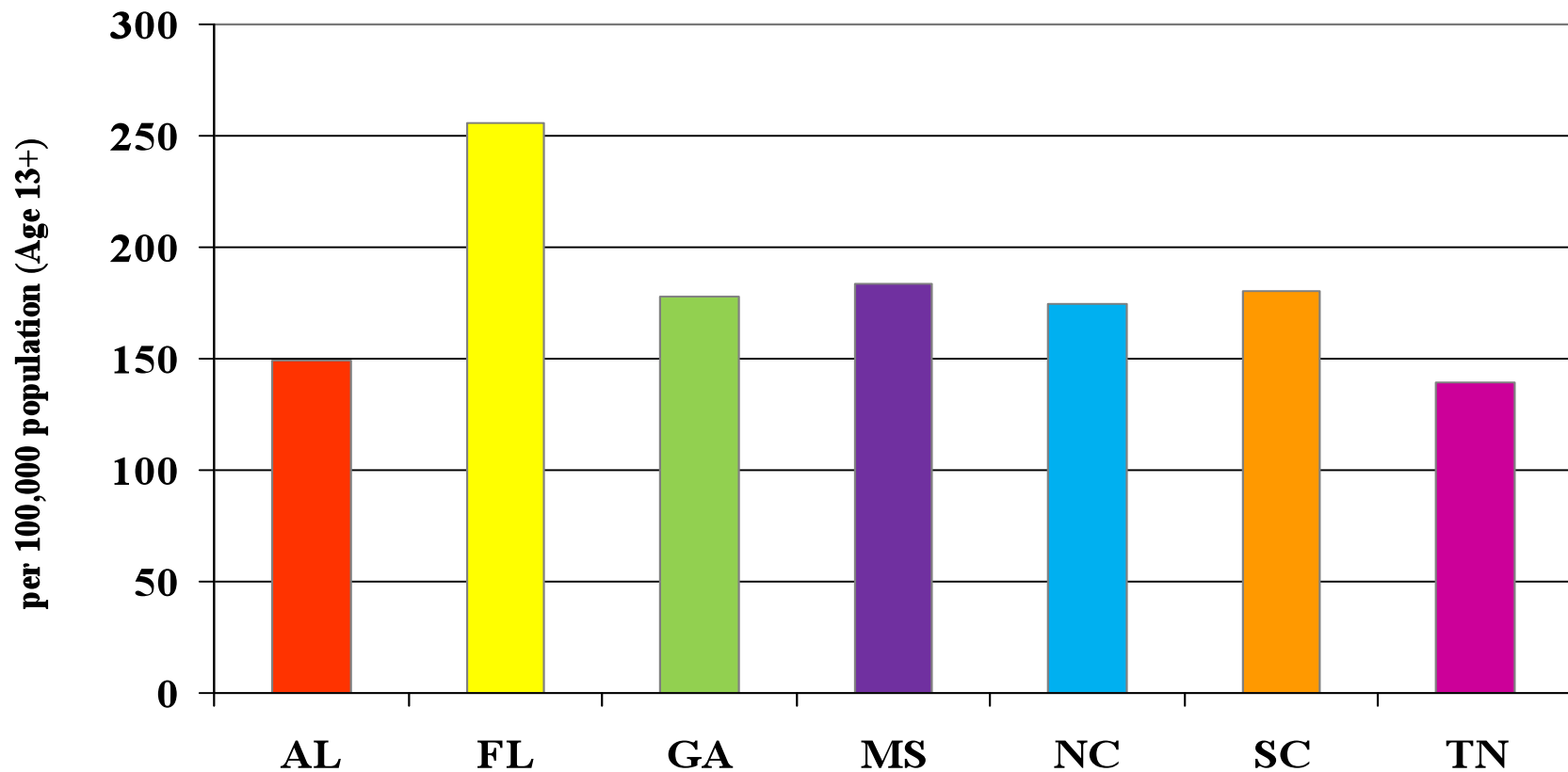


Gold RB, Sonfield A, Richards CL, Frost JJ. Next Steps for America's Family Planning Program: Leveraging the Potential of Medicaid and Title X in an Evolving Health Care System. New York: Guttmacher Institute, 2009

Reported Cases of HIV Infection (not AIDS)

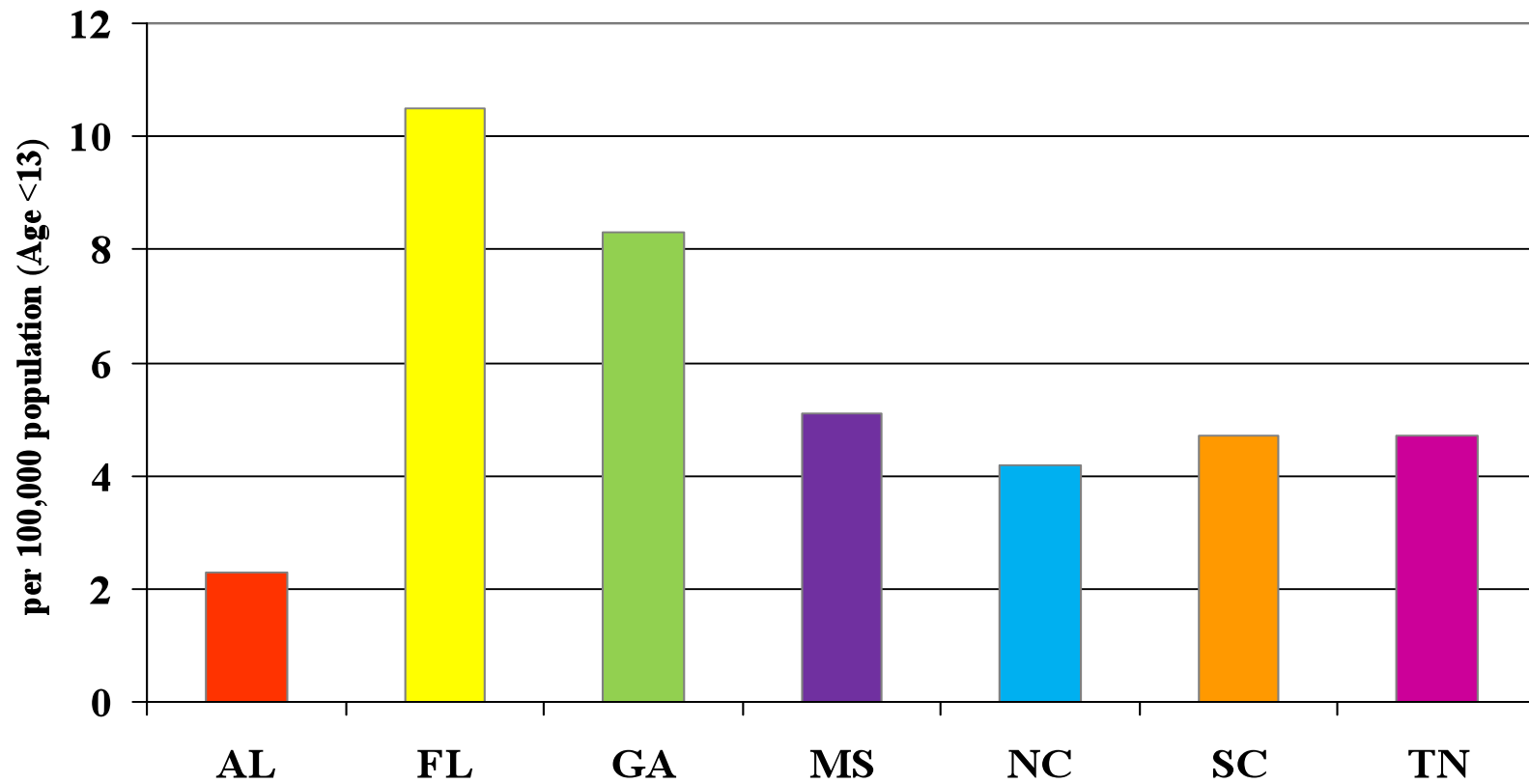
State	2003	2004	2005	2006	2007
AL	501	488	468	502	529
FL	5,467	5,107	4,637	4,163	5,165
GA	52	2,154	3,894	2,245	3,204
KY	NA	390	464	333	414
MS	354	340	399	352	471
NC	1,315	1,099	1,140	1,615	1,746
SC	539	571	527	493	542
TN	696	780	702	732	841
Region	8,924	10,929	12,231	10,435	12,912

Prevalence of HIV Infection or AIDS (per 100,000 population) 2007 [CDC data]



HIV Infection or AIDS (Children Age <13)

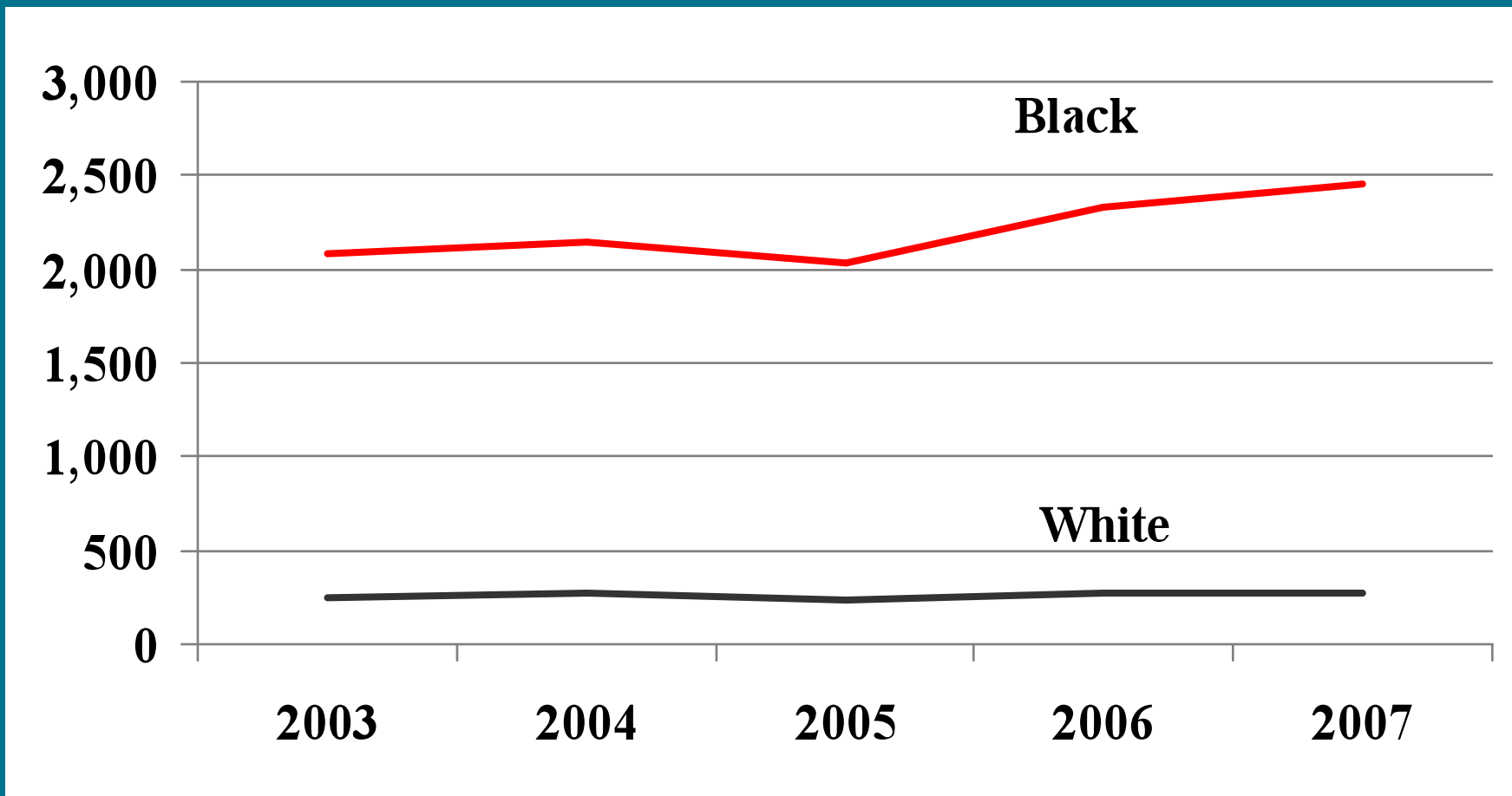
2007 [CDC data]



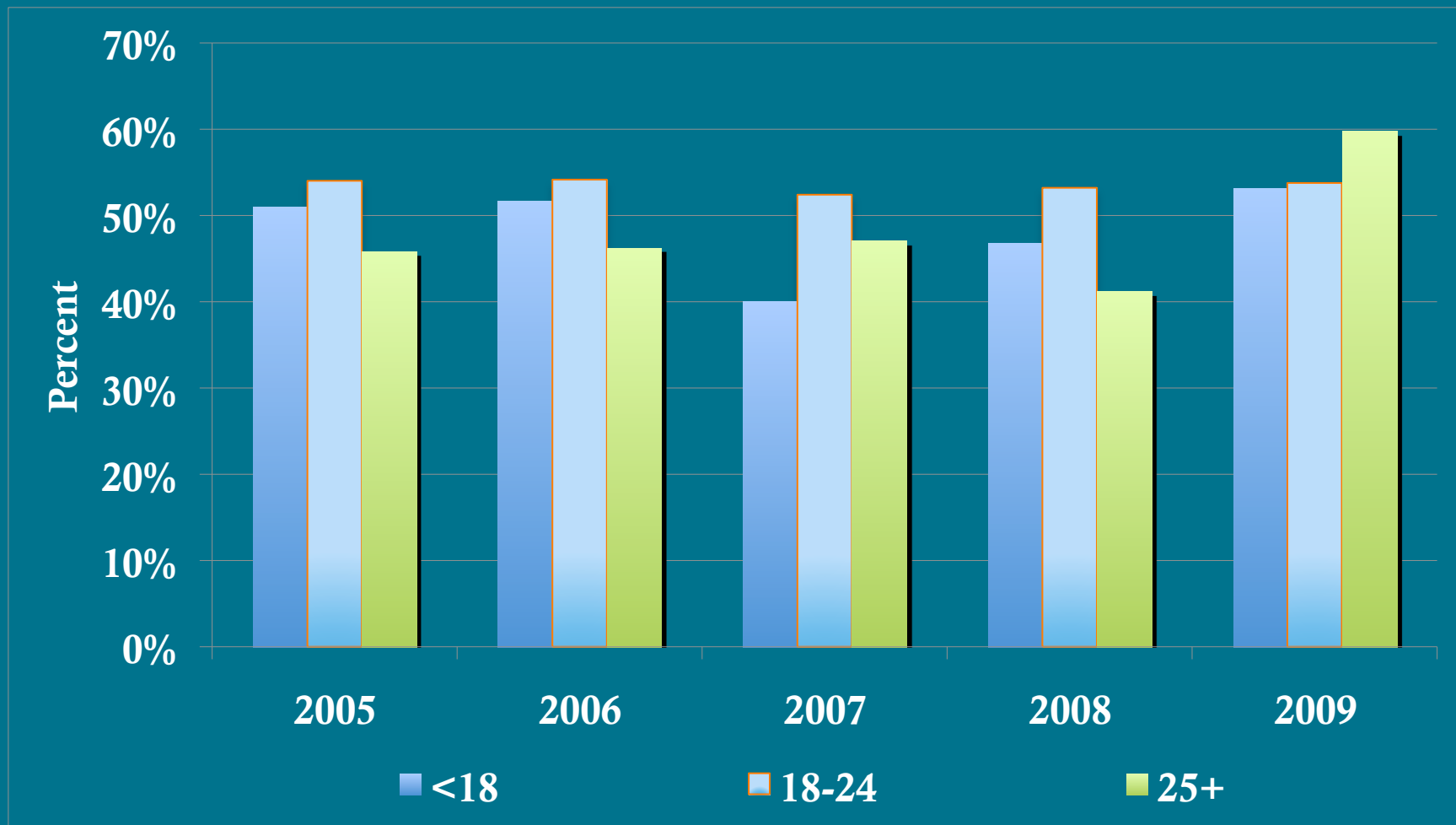
RTIs in Region IV

Combined Syphilis, Gonorrhea and Chlamydia

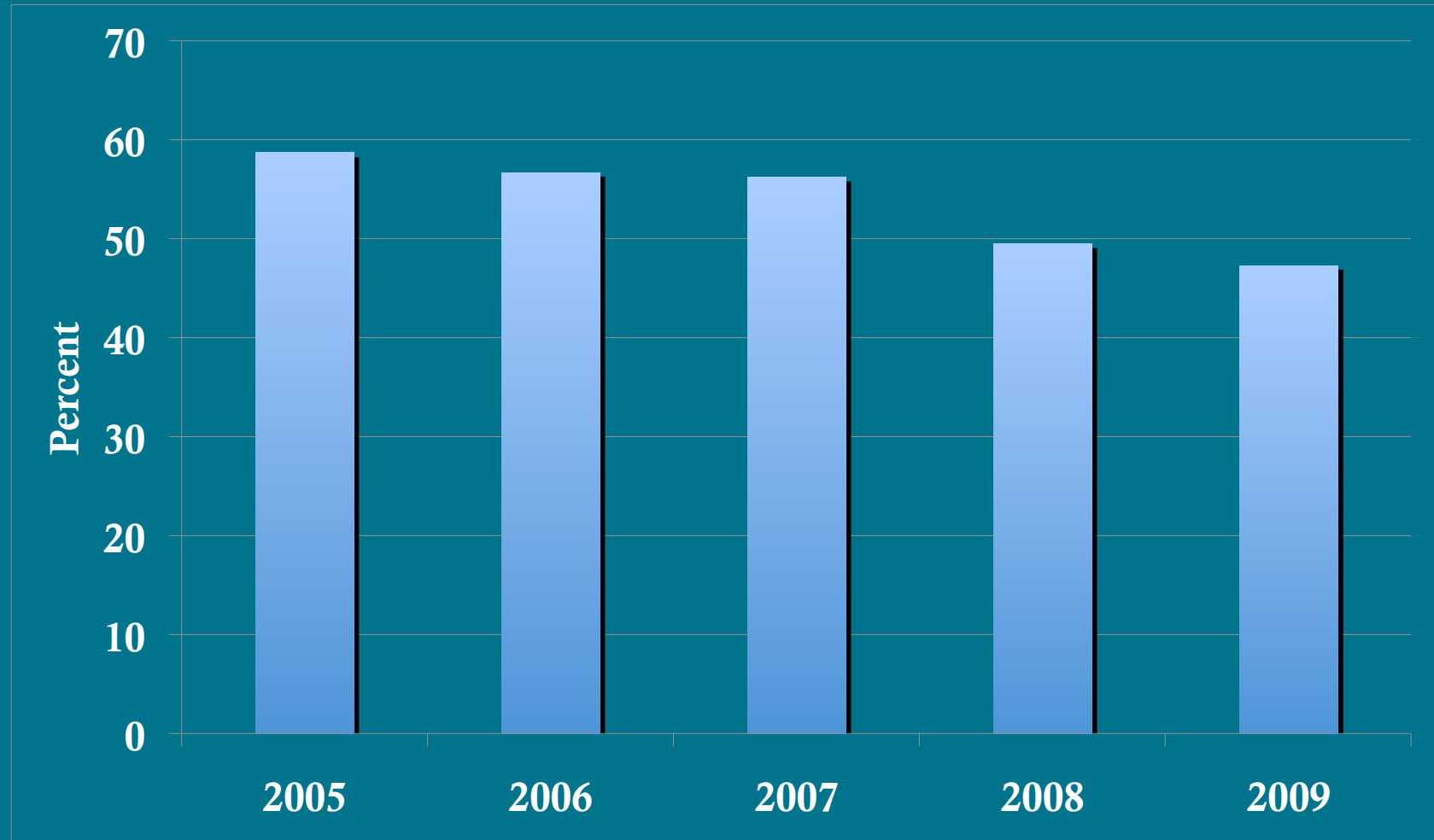
Females (Age 15+) Rate per 100,000



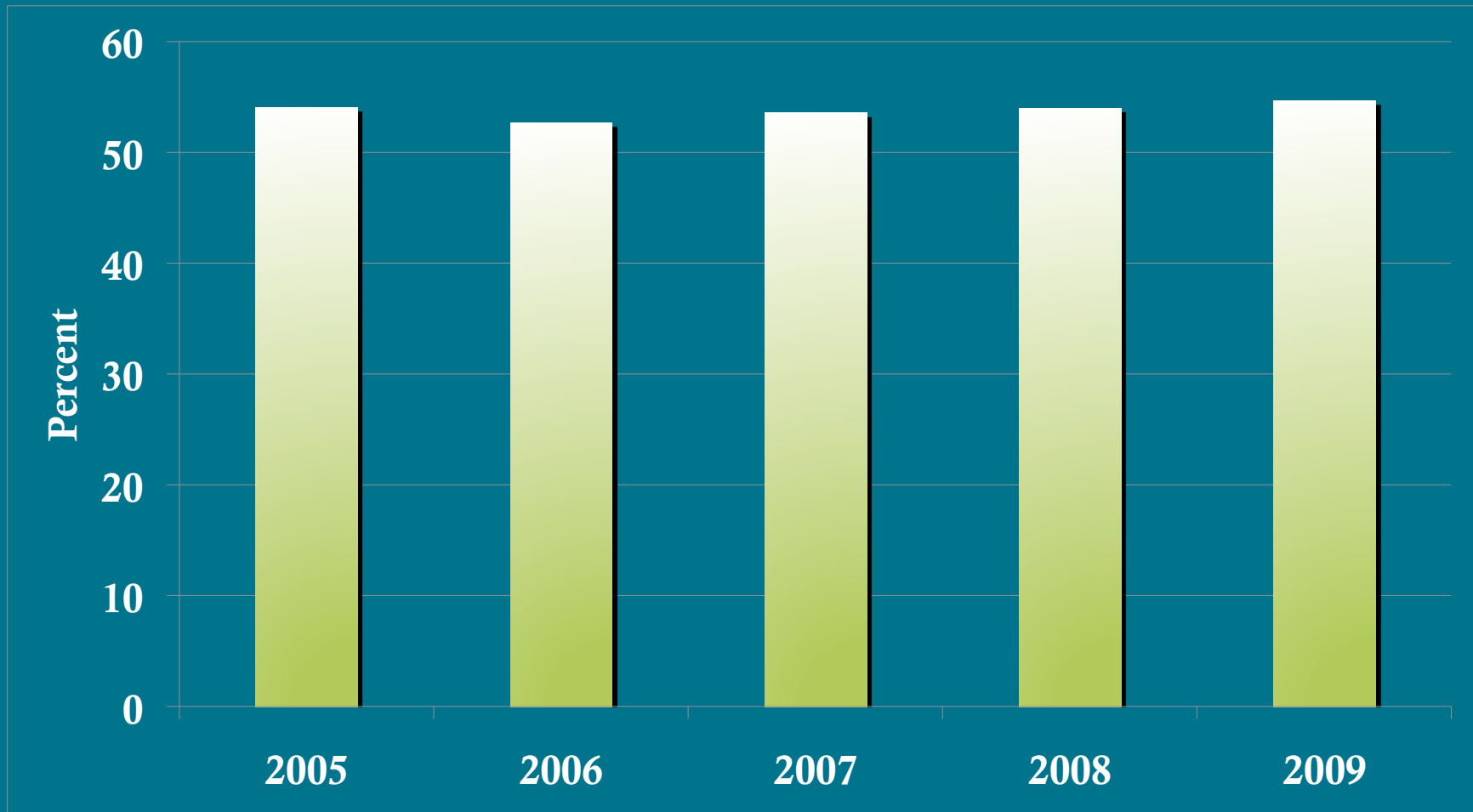
Female Title X Users That Were Tested for Chlamydia Region IV 2005 - 2009



Female Title X Users Obtaining a Pap Test Region IV 2005 - 2009



Title X Users That Received a Clinical Breast Exam Region IV 2005 - 2009



Health Care Reform: Key Opportunities

- 12 million women **gain coverage** by 2014
- Insurance reforms provide **new protections**
- Expands coverage for **preventive services** \$11 billion
- Special appropriations for:
 - **Home visiting** (Ex: Mississippi MIME and DIME) \$1.5 billion
 - **Services for teens**, esp pregnancy prevention (\$375 million) and parenting teens (\$125 million)
 - **Treatment** of conditions in post-partum period (\$15 million for PP depression)
 - **CHCs** \$11 billion, shift to primary care focus

Health Care Reform Opportunities (cont.)

- **Bright Future's for Women** (parallel Children's)
 - Preconception health, prevention
 - Smoking cessation for pregnant women
- **FP Waiver and SPAs**
- **Medicaid \$ for establishing "health homes"**
 - \$25 million in planning grants
- **CHC and primary care capacity expansion**
 - Training (NHSC)
 - Operations (\$\$)
 - Residency supports

Cost Savings of Improved Access to Prevention

- If five preventive services were utilized effectively:
 - colorectal screening
 - breast cancer screening
 - flu vaccines
 - counseling on smoking cessation
 - regular aspirin use
- Avert 100,000 deaths each year
 - Effective cancer screening, early treatment ==> reduce the cancer death rate by 29 percent
- We need current data on cost savings and investments in Family Planning

Cost Savings of Improved Access to Family Planning:

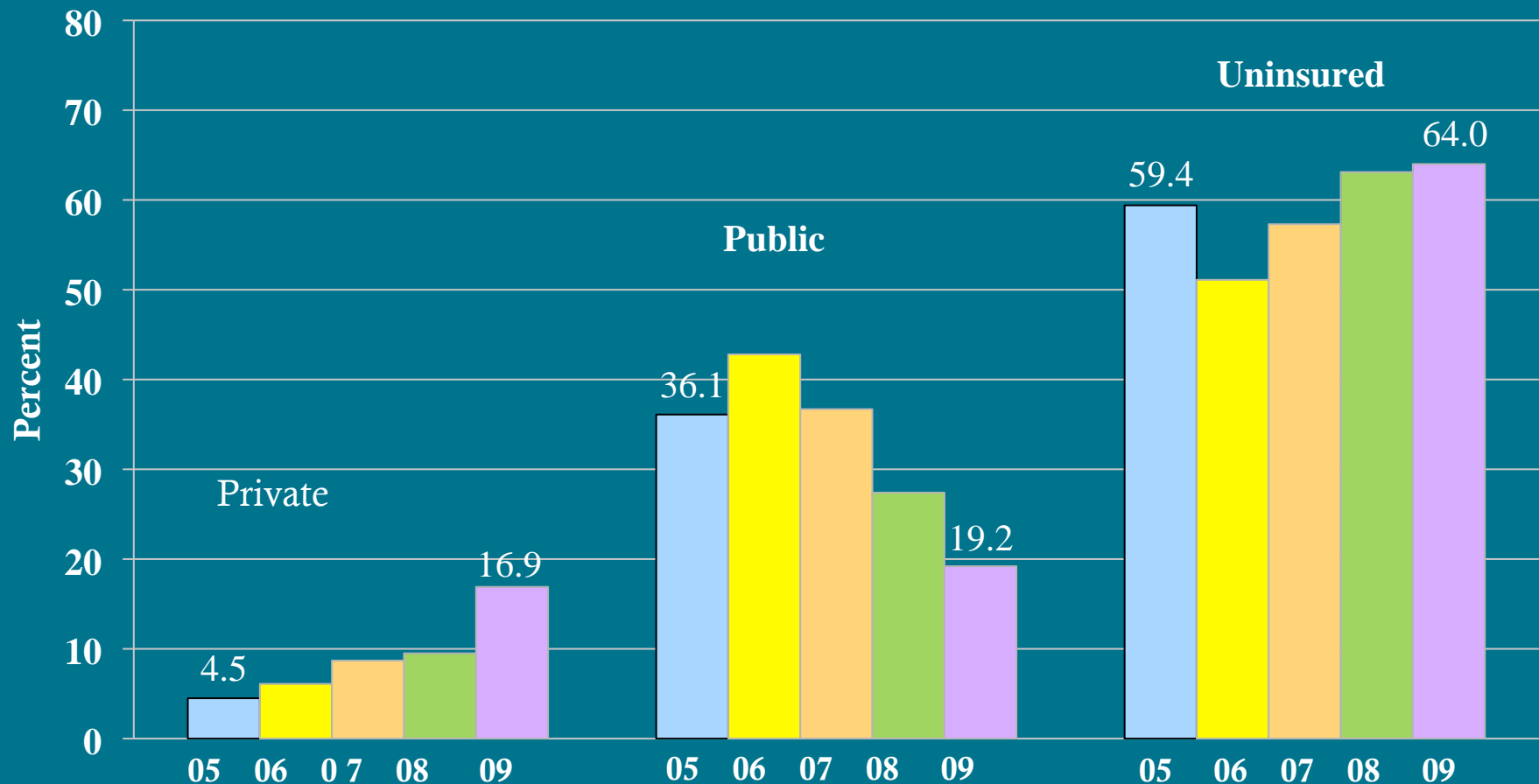
- **Lengthened intervals between pregnancies:**
 - **Oklahoma:** % women using contraceptive services six months after Medicaid-funded delivery rose 20% in two years
 - **Arkansas:** repeat births @ 12 months dropped 85% for women enrolled in the family planning expansion, 2001 - 2005
 - **Rhode Island:** % women w/ Medicaid-funded birth becoming pregnant again within 18 months plummeted following initiation of the state's family planning expansion in 1993
 - By 2000, for the first time, Medicaid enrollees in **Rhode Island** less likely to have short inter-pregnancy interval than privately insured women

Family Planning Clinics As Medical Home

- “More than six in 10 women who obtain care at a family planning center consider the center to be their usual source of medical care.”
- “The package of basic, preventive sexual and reproductive health services routinely provided in family planning centers—along with contraceptive services and supplies—is essentially the same package of care a private physician offers a woman during her annual gynecologic exam.”

Gold RB, Sonfield A, Richards CL, Frost JJ. Next Steps for America's Family Planning Program: Leveraging the Potential of Medicaid and Title X in an Evolving Health Care System. New York: Guttmacher Institute, 2009

Title X Users by Insurance Status Region IV 2005 - 2009



Rates exclude those with unknown insurance status.

Importance of Title X in Preventing Unintended Pregnancy

- “In the absence of publicly funded family planning, levels of unintended pregnancy and abortion would be **nearly two-thirds higher** among women overall and teens, and **close to twice as high among poor women.**”

Gold RB, Sonfield A, Richards CL, Frost JJ. Next Steps for America's Family Planning Program: Leveraging the Potential of Medicaid and Title X in an Evolving Health Care System. New York: Guttmacher Institute, 2009