Resolution to Remove Barriers to IUD Use

WHEREAS reproductive health care is part of comprehensive primary care and the AAFP “is concerned about the sexual health of adults,”¹ and

WHEREAS the disparity in unintended pregnancy by income grew between 1994 and 2001, and during that same time the rate of unintended pregnancy among poor women increased 29%;² and

WHEREAS the AAFP Policy on Reproductive Decisions states, “The AAFP believes physicians should seek to, through extensive patient education and counseling, decrease the number of unwanted pregnancies,”² and

WHEREAS IUDs are among the most cost-effective reversible methods, yet with with a significant upfront expense³ — with an estimated 5-year cost of $647 and $930, for copper and hormonal IUDs respectively. By contrast, oral contraceptives had an estimated total cost of $3381 over the same time period,⁵ and

WHEREAS the ACOB (2009) recommended that IUDs “be offered as a first-line contraceptive method and encouraged … for most women”⁶ and

WHEREAS IUD utilization in the United States remains low compared to other countries⁷, and according to the latest National Survey of Family Growth (2006–2008), only 5.5% of US reproductive age women using contraception use an IUD,⁸ ⁹ and

WHEREAS there exist numerous recognized barriers to IUD use, including lack of clinician knowledge or skill,¹⁰ ¹¹ low patient awareness of the method¹² and high upfront costs ¹³ ¹⁴ and

WHEREAS Gariepy (2011) found that 43% of women had no coverage for IUDs and that high out-of-pocket expense was highly associated with failure to obtain an IUD, with nonwhite women facing greater out-of-pocket expense than white women¹⁵ and whereas other research has shown that cost concerns are an important factor in contraceptive method choice and use¹⁶ and

WHEREAS unlike other medications or devices that usually decrease in cost the longer they are on the market, the cost of IUDs has been increasing. In March of 2010, the average wholesale price of the levonorgestrel IUD in the United States increased 43%, from $586 to $843¹⁷ now be it

RESOLVED that the CAFP will advocate for improved insurance coverage of IUDs, including adequate provider reimbursement with regard to the current cost of the devices, and reduced out-of-pocket expenses for patients, thus reducing barriers to IUD use as a first-line option for most women, and be it further

RESOLVED that the CAFP endorses increased resident and CME education on the use of IUDs, and be it further

RESOLVED that the CAFP instruct its delegates to bring this resolution to the AAFP. Congress of Delegates.