Increasing access to LARC
Background & Context

- Population ~5 million
- ~300,000 women in need of subsidized reproductive health services
- State-run insurance exchange
- Medicaid expansion
  - >1 million Medicaid enrollees
LARC efforts

- Funding for LARC
  - Medicaid
  - Title X
    - More than 30,000 device insertions in 6 years
  - Colorado Initiative to Reduce Unintended Pregnancy
    - Colorado Family Planning Initiative (Title X)
    - Post-abortion and post-partum insertions
      - LARC use among teen moms >50%
LARC impact

- Close to 7,000 births averted
- 40% drop in teen birth rate
- >50% drop in second and higher order teen births
- Decreased abortion rate
- Decreased demand for WIC enrollment
- Medicaid savings
- Possible impact on lowering infant mortality
Successes & Challenges

Successes
- Adoption rate of LARC
- Positive population impact
- Positive public response
- We know this works!

Challenges
- Provider willingness/acceptance
- Administrative barriers (particularly in religiously affiliated systems)
- Payment outside of grant funds
What’s worked well

- Partnership & communication between CDPHE and HCPF
- Having providers as champions for LARC
- Provider training and partnership
- Word of mouth
What’s been difficult

- Dealing with reimbursement issues
- Overcoming provider and administrative barriers
- Issues around confidentiality
- Cost of devices
What comes next...

- Provider training and education
  - Post-partum LARC insertion
  - Primary care providers
- Payment issues at FQHCs and RHCs
- Confidentiality and insurance