



Paying for Contraception In the United States

- Contraceptive services and supplies can be costly. The most effective, long-acting methods can cost hundreds of dollars up front. Even methods that are relatively inexpensive on a per-unit basis (such as condoms) can cost substantial amounts over the course of a year of use, not to mention over the 30 years that a woman typically spends trying to avoid pregnancy.
- In 2016, an estimated 21 million women were likely in need of publicly funded contraceptive services and supplies because they either had an income below 250% of the federal poverty level or were younger than 20 (and thus were likely to have had a heightened need—for reasons of confidentiality—to obtain care without depending on their family's resources or private insurance). The federal and state governments provide funding for family planning services and supplies to help women meet these challenges.
- Publicly funded family planning services help enable women to avoid or delay pregnancies that they otherwise would have been unable to prevent. In 2016, these services helped women avoid nearly two million pregnancies, which would likely have resulted in more than 900,000 births and nearly 700,000 abortions.
- Millions of U.S. women rely on private insurance coverage to help them afford contraceptive services and supplies. The Affordable Care Act requires most private health plans to cover a designated list of preventive services without out-of-pocket costs to the consumer, including all FDA-approved contraceptive methods and contraceptive counseling for women.
- As of December 2019, some 29 states also have laws in place requiring insurers that cover prescription drugs in general to cover the full range of FDA-approved contraceptive drugs and devices.

SOURCES

References are available in the HTML version: <https://www.guttmacher.org/factsheet/paying-contraception-united-states>

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125 Maiden Lane
New York, NY 10038
212.248.1111
info@guttmacher.org

www.guttmacher.org

@ This fact sheet is part of a collection on contraceptive use in the United States.
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