

Healthy People 2010 Operational Definition

9-13. Increase the proportion of health insurance plans that cover contraceptive supplies and services.

National Data Source	The Allan Guttmacher Institute.
State Data Source	Not identified.
Healthy People 2000 Objective	Not applicable.
Changes since the 2000 Publication	Revised text (see Comments).
Measure	Percent.
Baseline (Year)	86 (2002)
Target	90
Target-setting method	5 percent improvement. For a discussion of target-setting methods, see Part A, section 4.
Numerator	Employment based insured health plans that routinely cover the leading five methods of contraception: diaphragm, implant, injectable, intrauterine device (IUD) and oral contraceptive pills.
Denominator	U.S. insurers providing employment-based insured health coverage.
Population Targeted	Not applicable.
Questions Used To Obtain the National Baseline Data	From the 2002 Alan Guttmacher Institute Survey: ➤ <i>In your typical indemnity policy/contract is each of the following:</i> <i>(1) covered when considered medically necessary or appropriate by the health care provider;</i> <i>(2) covered only when additional requirements (i.e., additional specific medical justification supplied by the health care provider) are met; or</i> <i>(3) not covered at all?</i> [Please check only one answer in each row below for each service, drug, or device] <i>Specific services/supplies</i> <i>Annual gynecological exams</i>

Condoms
Contraceptive cream/gel/foam (non-prescription)
Contraceptive implant (Norplant)
 Device
 Insertion
 Removal
Contraceptive injectable
 1 month - (Lunelle)
 3 month - (Depo-Provera)
Diaphragm
 Device
 Fitting
Induce abortion (outpatient)
 Dilation & curettage/suction aspiration
 Dilation and evacuation
 Medical (nonsurgical)
IUD
 Device
 Insertion
 Removal
Oral contraceptives
Pap test
 Standard
 Thin-Prep
Postcoital emergency contraceptives
Tubal ligation (laparoscopic)
Vasectomy

Expected Periodicity Periodic.

Comments

In 1993, the Allan Guttmacher Institute conducted a survey of a nationally representative sample of employment-based health plans the United States to examine coverage for reproductive health services, including coverage for reversible contraception.¹

The Office of Populations Affairs provided funding to AGI for a similar survey conducted in 2001-2002. The data from this survey, which shows trends in coverage between 1993 and 2002, are available.²

This objective moved from developmental to measurable during the Healthy People 2010 Midcourse Review. The objective text was revised from: “increase the proportion of health insurance policies that cover contraceptive supplies and services” to: “Increase the proportion of health insurance plans that cover contraceptive supplies and services” to more accurately reflect the revised data source.

See Appendix A for focus area contact information.

References

1. The Alan Guttmacher Institute. *Uneven and Unequal: Insurance Coverage and Reproductive Health Services*. New York, NY: the Institute, 1994, 1-38.
2. Sonfield, A.; Gold, R.; Darroch, J. U.S. Insurance Coverage of Contraceptives and the Impact of Contraceptive Coverage Mandates, 2002. *Perspectives on Sexual and Reproductive Health*, 2004, 36(2): 72-79.