



T E X A S
Women's Healthcare
COALITION

House Committee on Insurance
HB 937
Testimony of the Texas Women's Healthcare Coalition
March 19, 2019

The Texas Women's Healthcare Coalition (TWHC) and its 84 healthcare, faith, and community-based member organizations are dedicated to improving the health and wellbeing of Texas women, babies, and families by ensuring access to preventive healthcare for all Texas women. Access to preventive and preconception care—including health screenings and contraception—means healthy, planned pregnancies and early detection of cancers and other treatable conditions.

Thank you for this opportunity to provide testimony in support of Representative Sarah Davis' House Bill 937, which ensures women are able to obtain a greater supply of prescription contraception at one time. This bill will increase contraceptive consistency, resulting in lower unplanned pregnancy rates and improved health outcomes for women, babies, and families in Texas.

The importance of reducing unintended pregnancies in Texas

Nearly half of all pregnancies in the state are unplanned.ⁱ Increasing women's ability to plan and space their pregnancies leads to an array of benefits, including improved infant and maternal health, better educational and economic opportunities for families, lower abortion rates, and cost savings for the state.

Women who plan pregnancies are more likely to receive early prenatal care, have healthier pregnancies, and reduce their risk of having premature babies.^{ii iii} Women whose pregnancies are unintended are much more likely to have a short interval between pregnancies, which can significantly increase health risks including prematurity, low birth weight, and neonatal death.^{iv} Further, women who plan their pregnancies are less likely to smoke or consume alcohol while pregnant.^v When women can time their entry into parenthood, they also experience an array of educational and economic benefits, including higher earnings.^{vi}

Unintended pregnancies are costly to the state. In fiscal year 2016, Medicaid paid for about half of all births in the state^{vii viii} at a cost of \$3 billion for pregnancy and delivery-related services for moms and infants during the first year of life.^{ix} In 2010, 74 percent (133,000) of unplanned births in Texas were publicly funded, with a public cost of \$2.9 billion.^x Reducing unintended pregnancy is key to reducing poor birth outcomes and the costs associated with them. For

premature and low birth-weight babies, Texas spends an average of \$109,220. For babies born full-term, we spend only \$572.^{xi} In fiscal year (FY) 2015, Medicaid paid more than \$402 million for newborns who were premature or had a low birth weight.^{xii} Policy solutions that reduce unplanned pregnancy rates are critical for the health of women and babies, and for the economic health of the state.

Limited supplies of contraception increase likelihood of inconsistent use and unplanned pregnancy

Ensuring women are able to access consistent birth control is critical to reducing unplanned pregnancies. Unfortunately, health plans often limit the supply of prescription birth control women can obtain to one or three months. National data has found that two-thirds of women report their plan or clinic allows them to receive only three months' supply or less.^{xiii} This finding is borne out in Texas, where a study on one of the state's women's health programs found both a wide variation in pill pack distribution, and that most providers offer three or fewer packs at one time.^{xiv}

Many women struggle to maintain consistent contraceptive use when they are forced to return to the pharmacy every month to receive their next supply. Unlike many other medications, missing a dose of prescription contraception can negate the medication's effect, leading to a higher chance of unplanned pregnancy. These barriers to access can be further exacerbated if a woman lives a long distance from a pharmacy, or if she experiences a gap in prescription coverage due to switching jobs or insurance.

Running out of birth control pills is among the primary reasons women discontinue oral contraceptive use. Studies have found that discontinuation rates range from 25 to 85 percent during the first 6 to 12 months of use due to barriers to access and supply.^{xv} In one study, nearly 30 percent of women taking oral contraceptives reported missing a pill because they could not get the next pack on time.^{xvi} These barriers put women at a higher risk for unintended pregnancy.

Providing multiple months of birth control will reduce unplanned pregnancy and lead to cost savings

A common-sense solution for increasing continuation of birth control and reducing unintended pregnancies is enabling women to receive a larger supply at one time. Research has shown that women who receive a one-year supply are 30 percent less likely to have an unintended pregnancy compared to women receiving a one to three-month supply. This same study found that giving women a one-year supply of birth control reduced the likelihood of abortion by 46 percent.^{xvii}

The Centers for Disease Control and Prevention (CDC) and the American College of Obstetricians and Gynecologists (ACOG) both recommend providing multiple cycles of oral contraceptive pills, the patch, or the ring.^{xviii} The CDC and ACOG, along with other leading

health organizations, recognize a greater supply of birth control as a key to improving continuity of care, reducing unintended pregnancy rates, and providing quality care.

Improving continuity of care will also lead to significant cost savings in Texas. In California, the anticipated savings from requiring a 12-month supply provision was \$42.8 million a year, due to a substantial decrease in unplanned pregnancies.^{xix} Increases in contraceptive supply do not reduce women's screenings and treatments for other preventive health conditions. In fact, in California they found that providing a one-year supply increased the likelihood of receiving both pap smears and Chlamydia tests during the year, compared to women given fewer cycles.^{xx}

Although some insurers in other states have expressed concerns that clients would not use all the pills prescribed if given a multi-month supply, research shows that women who receive a year-long supply of birth control are 28 percent more likely to continue to use them 15 months later.^{xxi} Finally, any cost to a health plan of providing the unused pills is more than offset by the health savings of reducing unplanned pregnancy rates. Reducing these rates will significantly curtail costs for prenatal care, labor, and delivery, as well as the additional costs of premature deliveries, which more frequently result from unplanned pregnancies. HB 937 takes important steps towards improving continuity of care for women.

Thank you for your consideration, and for your commitment to improving the lives of women and families in Texas. If you have any questions or we can provide further information, please contact Evelyn Delgado at EDelgado@TexasWHC.org.

Respectfully,

A handwritten signature in black ink that reads "Evelyn Delgado". The signature is written in a cursive style with a large initial "E".

Evelyn Delgado
Chair, Texas Women's Healthcare Coalition

Texas Women's Healthcare Coalition Steering Committee Members

Texas Medical Association
District XI (Texas) American College of Obstetricians and Gynecologists
Texas Academy of Family Physicians
Texas Association of Community Health Centers
Methodist Healthcare Ministries
Teaching Hospitals of Texas
Women's Health and Family Planning Association of Texas
Texans Care for Children
Center for Public Policy Priorities
Chair - Healthy Futures of Texas

Texas Women's Healthcare Coalition General Members

Access Esperanza Clinics Inc.	North Texas Nurse Practitioners
Amistad Community Health Center	Panhandle Nurse Practitioner Association
Austin Advanced Practice Nurses	Pasadena Health Center
Austin Physicians for Social Responsibility	People's Community Clinic
AWHONN Texas	Port Arthur Housing Authority
Brazos Valley Community Action Agency, Inc.	Pregnancy and Postpartum Health Alliance of Texas
Brazos Valley Nurse Practitioner Association	SALVERE (Striving to Achieve Literacy via Education, Research, and Engagement)
Cardea	San Antonio Metropolitan Health District
Center for Community Health, UNTHSC	San Antonio Nurses in Advanced Practice
Centering Health Institute	Schneider Communications
Central Texas Nurse Practitioners	South Plains Nurse Practitioner Association
Children's Hospital Association of Texas	South Texas Family Planning & Health Corp.
Coalition for Nurses in Advanced Practice	Southeast Texas Nurse Practitioner Associates
Coastal Bend Advanced Practice Nurses	Special Health Resources
Coastal Bend Wellness Foundation	St. David's Foundation
Community Healthcare Center	Susan Wolfe and Associates, LLC
Consortium of Texas Certified Nurse Midwives	Texas Association of Community Health Plans
Department of Ob/Gyn of UNTHSC and the ForHER Institute	Texas Association of Obstetricians and Gynecologists
El Buen Samaritano	Texas Campaign to Prevent Teen Pregnancy
El Centro de Corazón	Texas Council on Family Violence
El Paso Area Advanced Practice Nurse Association	Texas Health Institute
Food Bank of the Rio Grande Valley	Texas Hospital Association
Fort Worth Region Nurse Practitioners	Texas Medical Association Alliance
Haven Health	Texas Nurse Practitioners
Hill Country Advanced Practice Nurses & Physicians Assistants Association	Texas Nurses Association
Houston Area Chapter of NAPNAP	Texas Oral Health Coalition
Houston Area Nurse Practitioners	Texas Pediatric Society
League of Women Voters of Texas	Texas Unitarian Universalist Justice Ministry
Legacy Community Health Services	Texas Women's Foundation
Lone Star Family Health Center	The Contraceptive Initiative
March of Dimes – Texas	The SAFE Alliance
Mental Health America of Greater Houston	The Women's Fund for Health Education and Resiliency
National Association of Nurse Practitioners in Women's Health	United Methodist Women
National Council of Jewish Women—Texas State Policy Advocacy Network	University Health System
National Latina Institute for Reproductive Health	Valley AIDS Council
North Harris Montgomery Advanced Practice Nurse Society	Women's & Men's Health Services of the Coastal Bend, Inc.
North Texas Alliance to Reduce Teen Pregnancy	Young Invincible

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