TITLE: Support Placement and Coverage of Long-Acting Reversible Contraceptives (LARC) in the Early Postpartum Period

WHEREAS, providing women with early postpartum access to LARC methods significantly reduces the risk of unplanned pregnancies and improves the health of newborns and mothers by facilitating healthy spacing between pregnancies.¹

WHEREAS, birth intervals less than 18 months are associated with poor perinatal outcomes including preterm birth and low birth weight.^{2,3}

WHEREAS, women who used LARC methods have many fold increased likelihood of achieving optimal birth interval compared to women using other methods.²

WHEREAS, contraceptive initiation within 90 days of delivery helps achieve optimal birth spacing; most state Medicaid programs are yet not covering this service and many clinicians are not yet trained to provide the service.^{2,4}

WHEREAS, the ability to control the timing of her pregnancies is crucial to a woman's socioeconomic advancement as it affects her education, employment, mental health, and ability to care for existing children. ⁵

WHEREAS, ensuring prompt access to LARC would result in fewer unintended pregnancies, better health outcomes, and considerable cost savings for the healthcare system. ⁶

WHEREAS, placement of LARC is safe for women, with minimal effect on breastfeeding, good continuation rates and decreased pregnancy rates. ^{2,4,7}

WHEREAS, currently the most significant barriers to providing postpartum LARC are related to billing and payment from Medicaid and private insurance, with few states assuring coverage separate from the global fee. 8,9

WHEREAS, the AAFP has supported past resolutions to reduce barriers to LARC access for women, 10 now therefore be it

RESOLVED, that the ____ Academy of Family Physicians (_AFP) support a policy that LARC methods be a recommended option for postpartum women prior to hospital discharge, and be it further

RESOLVED, that the _AFP support a policy assuring coverage of LARC device and placement prior to hospital discharge, separate from the global fee, for all women who select these methods, and be it further

RESOLVED, that the _AFP submit a resolution asking the AAFP to support a policy that LARC methods be a recommended option for postpartum women prior to hospital discharge, and be it further

RESOLVED, that the _AFP submit a resolution asking the AAFP to support a policy assuring coverage of LARC device and placement, separate from the global fee, prior to hospital discharge for all women who select these methods.

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