

Maternal and Infant Health Initiative Contraceptive Measures, 2015-2017

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In July 2014, the US Centers for Medicare & Medicaid Services (CMS) launched a Maternal and Infant Health Initiative to improve postpartum visits and increase access to effective methods of contraception. One of the measures established to monitor the impact of the Initiative’s activities was the increase in use of Long-Acting Reversible Contraception (LARC). This report presents recent contraceptive use among Kentucky Medicaid beneficiaries.

Key Findings

At risk of unintended pregnancy:

- About 30% of female Medicaid beneficiaries received at least moderately effective contraception in 2017.
- A great proportion of 15-20 year old beneficiaries use Long-Acting Reversible Contraception (LARC) than 21-44 year olds.

Postpartum

- Receiving at least moderately effective contraception within 3 days of delivery is more common among 21-44 than 15-20 year olds.
- Rates of at least moderately effective contraception within 60 days of delivery were higher in 2017 than 2015-2016.
- Use of LARC within 60 days of delivery was consistently ~2 percentage points higher in 15-20 than 21-44 year olds.

Female Medicaid beneficiaries aged 15-20 years consistently have the highest rates of at least moderately effective contraception use compared to 21-44 year olds.

- About 30% of women 15-44 years received at least moderately effective contraception in 2017, up from ~ 25% in 2015 and 2016.
- The number of eligible women increased from 237,646 in 2015 to 273,712 in 2017.
- Rates of contraception use are highest among 15-20 year olds compared to 21-44 year olds.

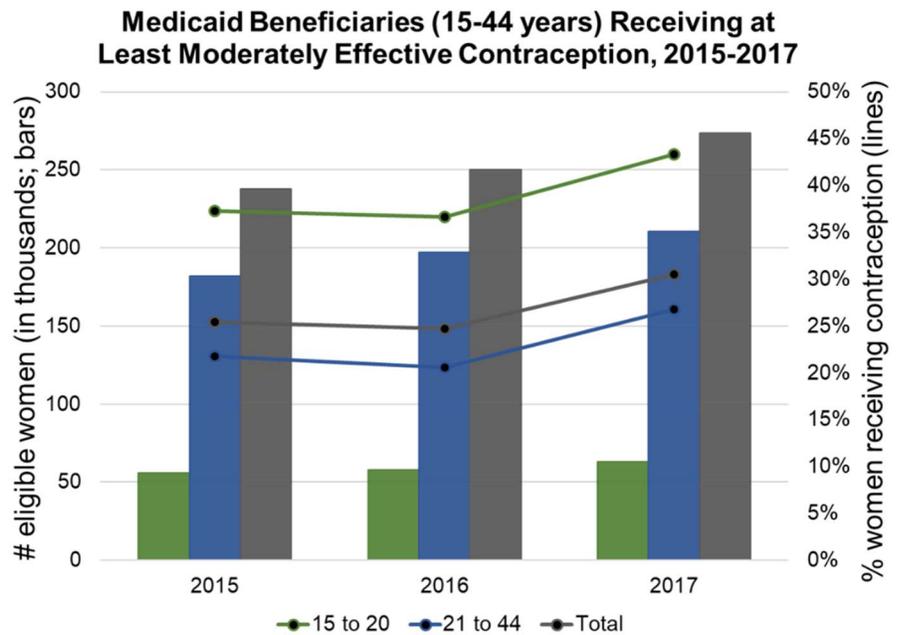


Figure 1. Medicaid Beneficiaries (15-44 years) Receiving at Least Moderately Effective Contraception, 2015-2017. The number of women (in thousands) 15-20 years (green), 21-44 years (blue), and total (gray) eligible to receive contraception by year (bars, left y-axis). The percent of eligible women within each age group receiving at least moderately effective contraception (lines, right y-axis). Female Medicaid beneficiaries were included if they were between 15-44 years old by December 31st of the measurement year and excluded if they were not at risk of unintended pregnancy (see methods). At least moderately effective contraception includes sterilization, injectables, oral pill, patch, ring, diaphragm usage, or long-acting reversible contraception (LARC). Data Source: Kentucky Department for Medicaid Services Office of Health Data & Analytics, February 2019.

Use of Long-Acting Reversible Contraception (LARC) increased from 2015 to 2017 and was highest among 15-20 year olds.

- Rates of Long-Acting Reversible Contraception (LARC) in women 15-44 years increased from 3.6% in 2015 to 4.7% in 2017.
- Beneficiaries 15-20 years old consistently had higher rates of LARC use than women aged 21-44 years.
- The total number of women receiving LARC increased from 8,612 in 2015 to 12,970 in 2017.

Medicaid Beneficiaries (15-44 years) Receiving LARC, 2015-2017

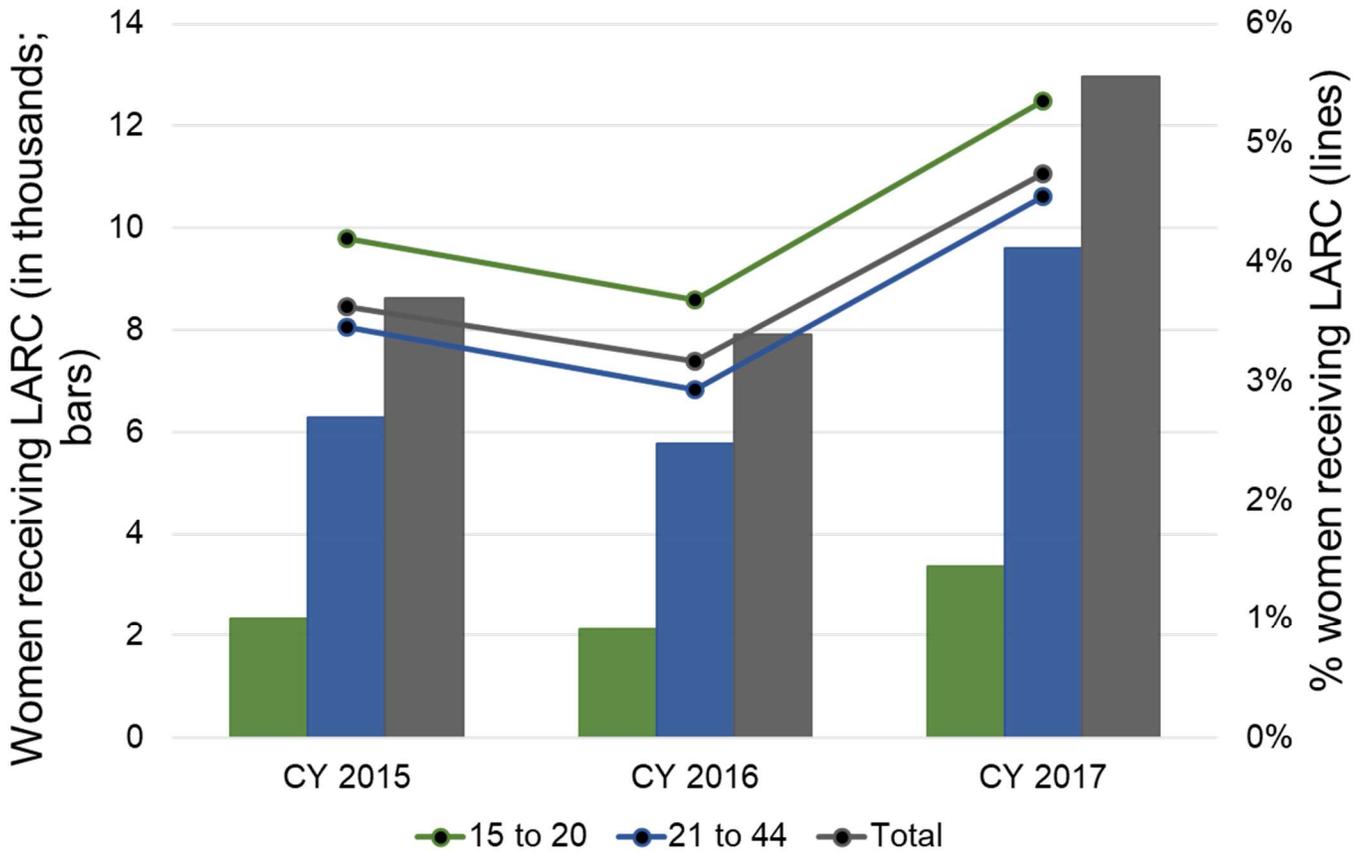


Figure 2. Medicaid Beneficiaries Receiving Long-Acting Reversible Contraception, 2015-2017. The number (in thousands) of women 15-20 years (green), 21-44 years (blue), and total (gray) receiving LARC by year (bars, left y-axis). The percent of eligible women within each age group receiving Long-Acting Reversible Contraception (LARC) by year (lines, right y-axis). Female Medicaid beneficiaries were included if they were between 15-44 years old by December 31st of the measurement year and were excluded if they were not at risk of unintended pregnancy (see methods description of exclusion conditions). LARCs are defined as intrauterine device/system or contraceptive implants. Data Source: Kentucky Department for Medicaid Services Office of Health Data & Analytics, February 2019.

Use of at least moderately effective contraception within 3 days of delivery is higher among 21-44 year olds than 15-20 year olds.

- Overall, the rate of at least moderately effective contraception within 3 days of delivery has remained stable at 8-9.5% of postpartum beneficiaries between 2015 and 2017.
- About 10% of postpartum 21-44 year olds received at least moderately effective contraception within 3 days of delivery between 2015 and 2017.
- In contrast, at most 3.3% of postpartum 15-20 year olds received at least moderately effective contraception within 3 days of delivery between 2015 and 2017.

Postpartum Medicaid Beneficiaries Receiving at Least Moderately Effective Contraception within 3 days of Delivery, 2015-2017

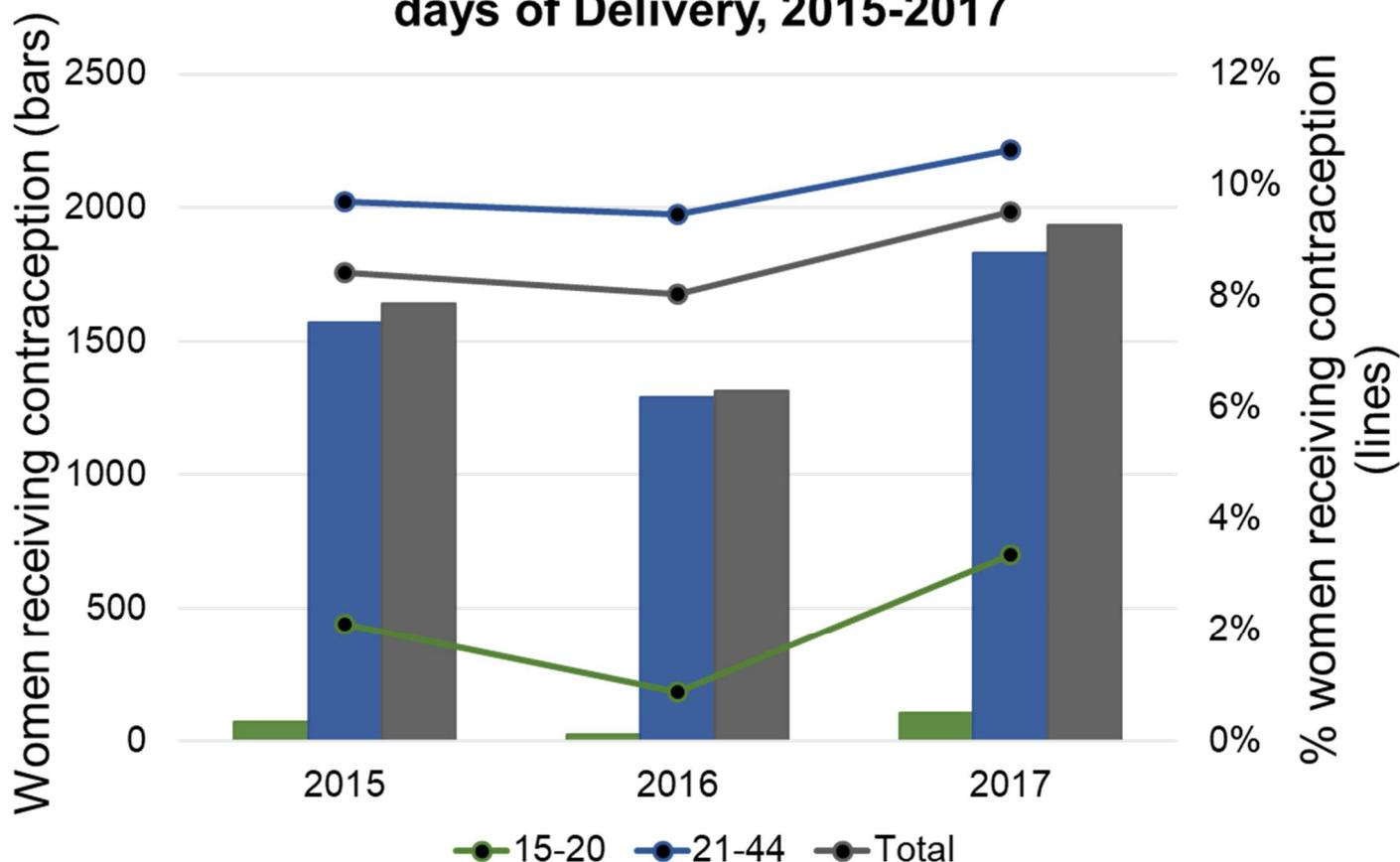


Figure 3. Postpartum Medicaid Beneficiaries Receiving at Least Moderately Effective Contraception within 3 Days of Delivery, 2015-2017. The number of postpartum women 15-20 years (green), 21-44 years (blue), and total (gray) who received at least moderately effective contraception within 3 days of delivery by year (bars, left y-axis). The percent of postpartum women within each age group receiving at least moderately effective contraception within 3 days of delivery (lines, right y-axis). Postpartum women were defined as the female population between 15-44 years old who were pregnant and who gave birth in the first 10 months of the year or whose pregnancy ended in a known miscarriage, ectopic pregnancy, stillbirth, or induced abortion. At least moderately effective contraception includes injectable, oral pill, patch, ring, diaphragm usage, or long-acting reversible contraception (LARC). Data Source: Kentucky Department for Medicaid Services Office of Health Data & Analytics, February 2019.

Use of Long-Acting Reversible Contraception (LARC) within 3 days of delivery is low, but increased ~1 percentage point from 2016 to 2017.

- Rates of Long-Acting Reversible Contraception (LARC) use within 3 days of delivery among postpartum Medicaid beneficiaries have been and remain low (less than 2% of postpartum women).
- In 2017, the rate of LARC use among postpartum women increased from 0.5% to 1.3%.
- Rates of LARC use within 3 days of delivery are similar among age groups.

Postpartum Medicaid Beneficiaries Receiving LARC within 3 Days of Delivery, 2015-2017

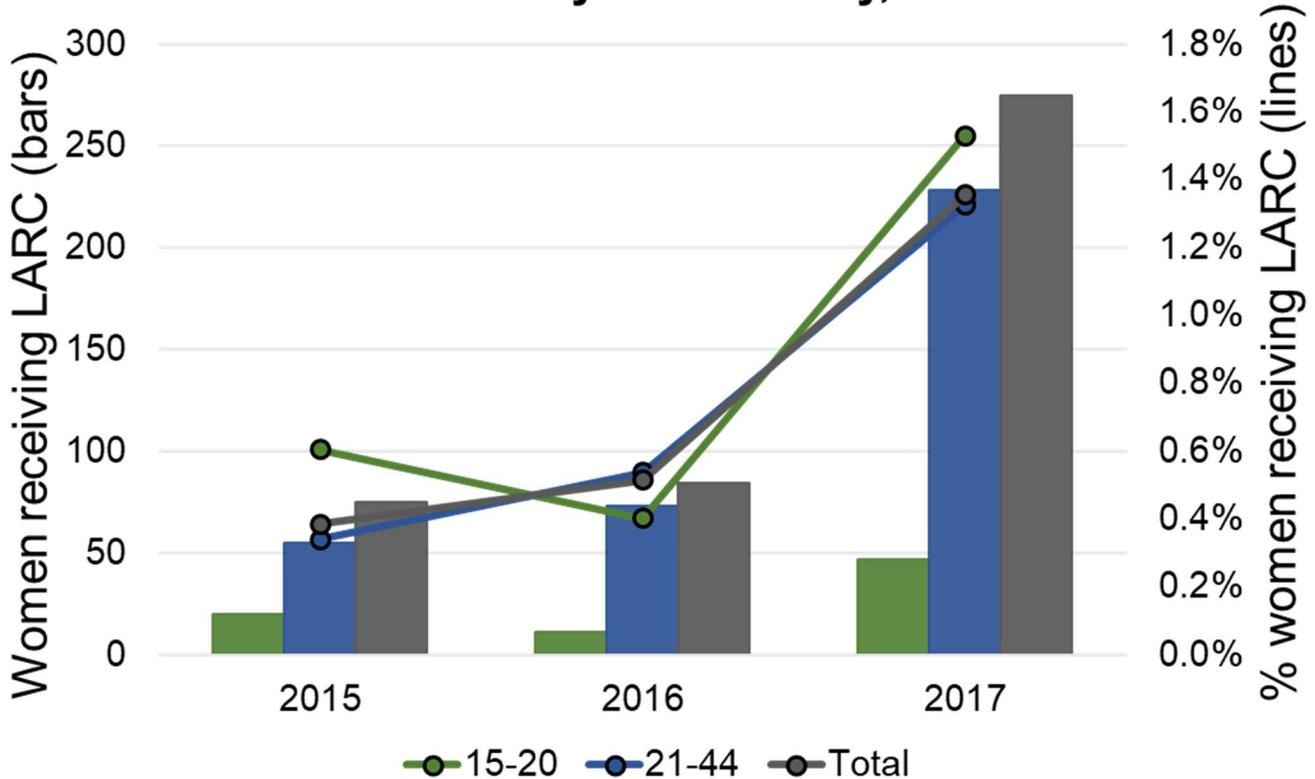


Figure 4. Postpartum Medicaid Beneficiaries Receiving LARC within 3 Days of Delivery, 2015-2017. The number of postpartum women 15-20 years (green), 21-44 years (blue), and total (gray) receiving Long-Acting Reversible Contraception (LARC) within 3 days of delivery (bars, left y-axis). The percent of eligible women within each age group receiving LARC within 3 days of delivery (lines, right y-axis). Postpartum women were defined as the female population between 15-44 years old who were pregnant and who gave birth in the first 10 months of the year or whose pregnancy ended in a known miscarriage, ectopic pregnancy, stillbirth, or induced abortion. LARCs are defined as intrauterine device/system or contraceptive implants. Data Source: Kentucky Department for Medicaid Services Office of Health Data & Analytics, February 2019.

The percent of postpartum Kentucky Medicaid beneficiaries receiving at least moderately effective contraception within 60 days of delivery increased in 2017.

- Nearly 50% of postpartum women received at least moderately effective contraception within 60 days of delivery in 2017, up from 37% and 25% in 2015 and 2016, respectively.
- Rates of contraception within 60 days of delivery are similar among postpartum 15-20 and 21-44 year olds.

Postpartum Medicaid Beneficiaries Receiving at Least Moderately Effective Contraception within 60 Days of Delivery, 2015-2017

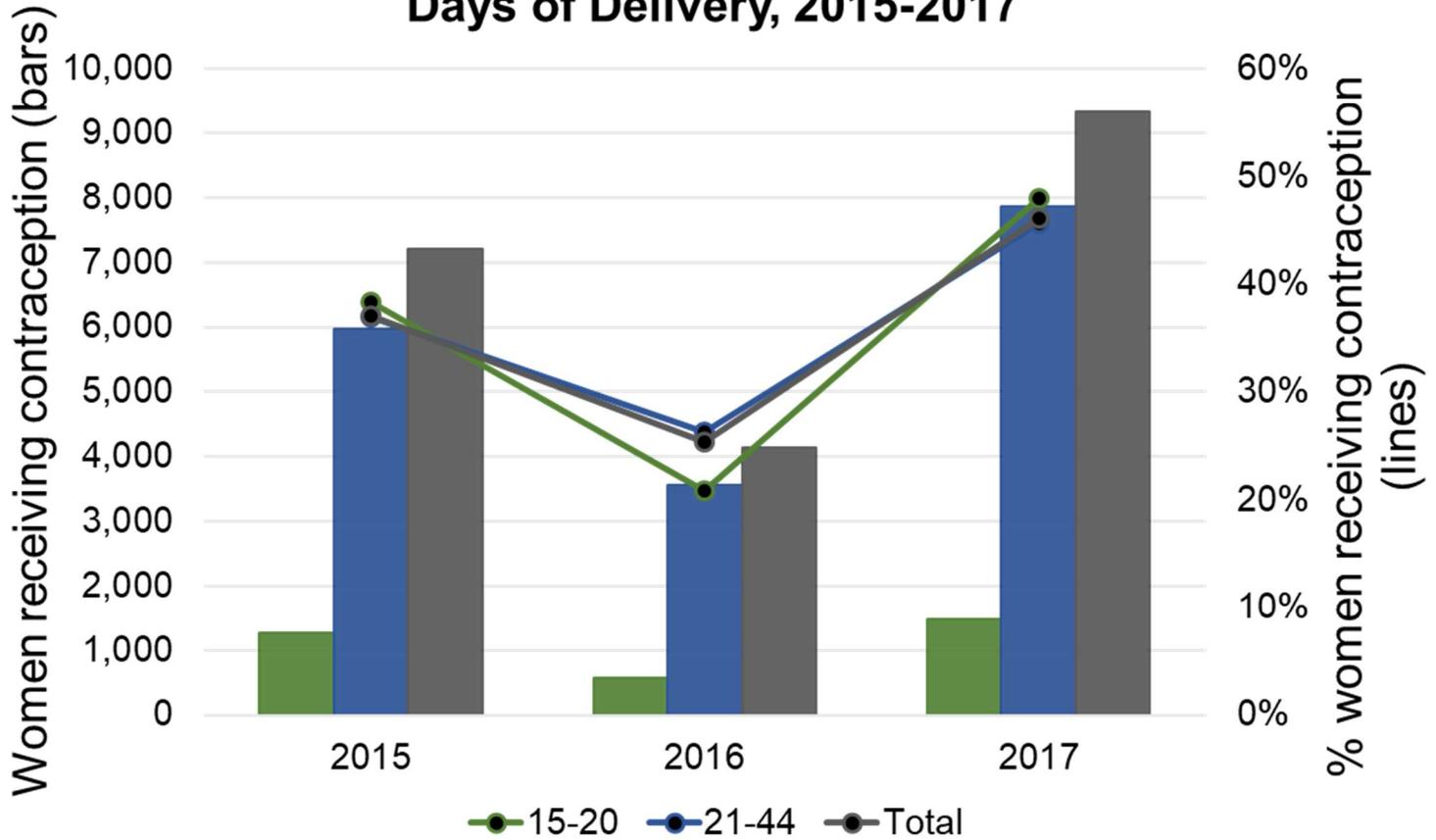


Figure 5. Postpartum Medicaid Beneficiaries Receiving at Least Moderately Effective Contraception within 60 Days of Delivery, 2015-2017. The number of postpartum women 15-20 years (green), 21-44 years (blue), and total (gray) who received at least moderately effective contraception within 60 days of delivery by year (bars, left y-axis). The percent of postpartum women within each age group receiving at least moderately effective contraception within 60 days of delivery (lines, right y-axis). Postpartum women were defined as the female population between 15-44 years old who were pregnant and who gave birth in the first 10 months of the year or whose pregnancy ended in a known miscarriage, ectopic pregnancy, stillbirth, or induced abortion. At least moderately effective contraception includes injectable, oral pill, patch, ring, diaphragm usage, or long-acting reversible contraception (LARC). Data Source: Kentucky Department for Medicaid Services Office of Health Data & Analytics, February 2019.

Long-Acting Reversible Contraception (LARC) use within 60 days of delivery is highest among 15-20 year olds and increased in 2017 from prior years.

- Use of Long-Acting Reversible Contraception (LARC) ranged from 7-12% of the total postpartum population from 2015 to 2017.
- The rate of LARC use in the younger age group (15-20 year olds) is consistently ~2 percentage points higher than 21-44 year olds.

Postpartum Medicaid Beneficiaries Receiving LARC within 60 days of Delivery, 2015-2017

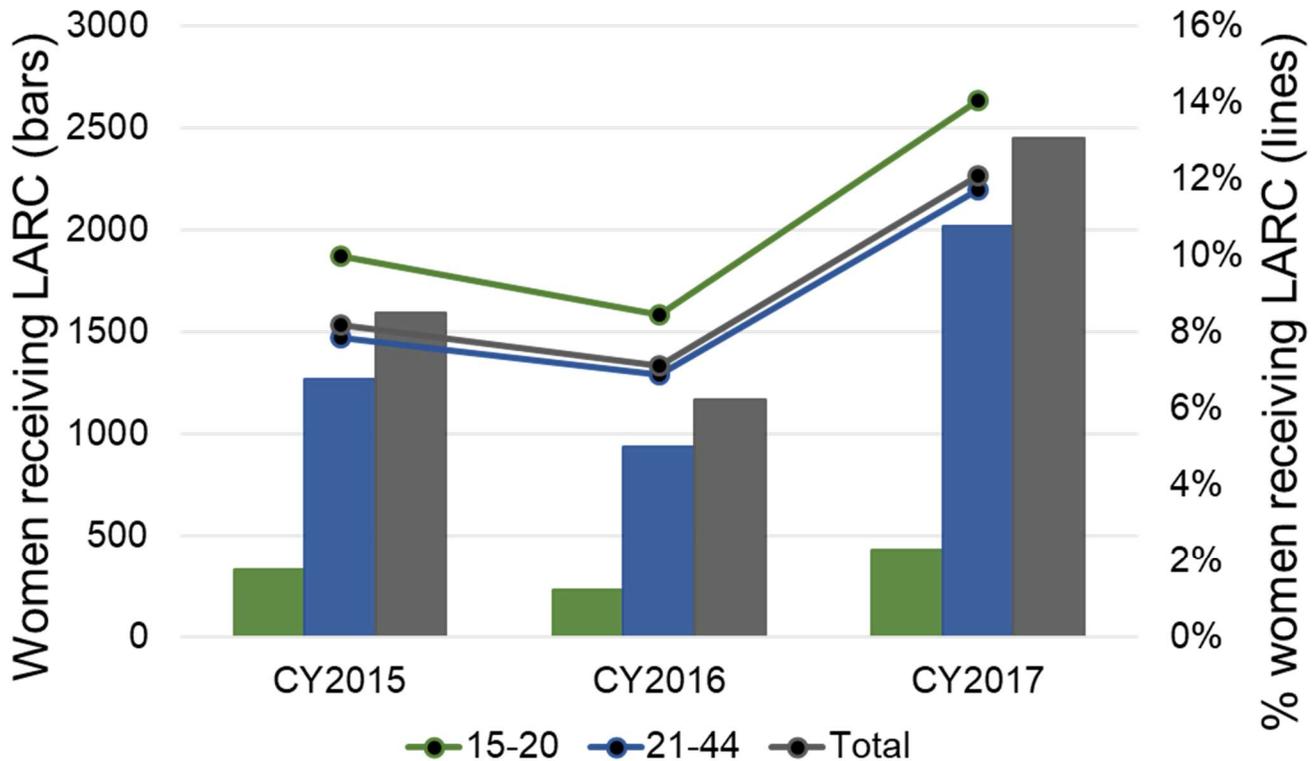


Figure 6. Postpartum Medicaid Beneficiaries Receiving LARC within 60 Days of Delivery, 2015-2017. The number of postpartum women 15-20 years (green), 21-44 years (blue), and total (gray) receiving Long-Acting Reversible Contraception (LARC) within 60 days of delivery (bars, left y-axis). The percent of postpartum women within each age group receiving LARC within 60 days of delivery (lines, right y-axis). Postpartum women were defined as the female population between 15-44 years old who were pregnant and who gave birth in the first 10 months of the year or whose pregnancy ended in a known miscarriage, ectopic pregnancy, stillbirth, or induced abortion. LARCs are defined as intrauterine device/system or contraceptive implants. Data Source: Kentucky Department for Medicaid Services Office of Health Data & Analytics, February 2019.

Summary

The number of women covered by Kentucky Medicaid who are at risk for unintended pregnancy increased by about 15% from 2015 to 2017. Less than one-third of these Medicaid beneficiaries received at least moderately effective contraception in 2017, but this was up from ~25% in 2015. Rates of contraceptive use in the overall population are higher among 15-20 than 21-44 year olds. Among postpartum beneficiaries, rates of contraceptive use are low within the first 3 days of delivery, with ~10% receiving at least moderately effective contraception within this time frame. However, within 60 days of delivery nearly 50% of postpartum women received at least moderately effective contraception. Younger women (15-20 years) are just as likely as 21-44 year olds to receive at least moderately effective contraception within 60 days of delivery, though the contraception choice differs. Specifically, younger women are more likely to receive LARC than 21-44 year olds.

Data source and methods

Kentucky Department for Medicaid Services (DMS) Office of Health Data and Analytics

Data were provided by the Kentucky Department for Medicaid Services Office of Health Data and Analytics, February 2019. The definitions used throughout were taken from the Centers for Disease Control and Prevention (CDC) measure Contraceptive Care (Version Specification: U.S. Office of Population Affairs 2017). The codes reported in the appendices are for the most recent year (2017); the codes for 2015 and 2016 were can be found on the CDC's specification for the measures for those years.

Population Figures 1 and 2

Female beneficiaries were considered for inclusion if they were between 15-44 years old by December 31st of the measurement period and had continuous enrollment (no more than 45-day gap) over the measurement period. Female beneficiaries were excluded if they were considered to be not at risk of unintended pregnancy for the following reasons:

- Women who were infecund due to non-contraceptive reasons such as natural menopause or oophorectomy using the codes listed in Appendix 1.
- Had a live birth in the last 2 months of the measurement year because there may not have been an opportunity to provide them with contraception. This period was selected because the American College of Obstetricians and Gynecologists (ACOG) recommends having a postpartum visit by 6 week, and an additional 2 week was added to allow for reasonable delays in attended the postpartum visit. Live births were identified using the codes listed in Appendix 2.
- Were still pregnant at the end of the year because they were pregnant (Appendix 3) but did not have a pregnancy outcome code indicating a non-live birth (Appendix 4) or a live birth (Appendix 2).

As a result, the eligible population in Figures 1 and 2 includes women (15-44 years by December 31st of the measurement year with continuous enrollment) who were:

- Not pregnant at any point in the measurement year
- Pregnant during the measurement year but whose pregnancy ended in the first 10 months of the measurement year
- Pregnant during the measurement year but whose pregnancy end in an ectopic pregnancy, stillbirth, miscarriage, or induced abortion.

Population Figures 4-6

Female beneficiaries were considered for inclusion if they were between 15-44 years old by December 31st of the measurement period, had a live birth (Appendix 2), and had continuous enrollment from the date of delivery to 60 days postpartum. Women with a live birth occurring after October 31st were excluded because they may not have had an opportunity to receive contraception in the postpartum period (defined as within 60 days of delivery).

Contraception methods Figures 1-6

At least moderately effective contraception: Women who were provided a most (sterilization, IUD/IUS, implant) or moderately (injectables, oral pills, patch, ring, or diaphragm) effective method of contraception in the measurement period. Codes to identify these methods found in Appendix 5.

Long-Acting Reversible Contraceptive (LARC) definition: women who were provided a LARC in the measurement period (Appendix 6).

Appendices

Appendix 1. Codes indicating sterilization for non-contraceptive reasons (i.e., hysterectomy, oophorectomy, or menopause)

ICD-10	E89.40, E89.41, E28.310, E28.319, E28.39, N95.0, N95.1, N95.2, Z78.0, Z90.710, Z90.722
CPT	58150, 58152, 58180, 58200, 58210, 58240, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58285, 58290, 58291, 58292, 58293, 58294, 58541, 58542, 58543, 58544, 58548, 58552, 58554, 58570, 58571, 58572, 58573, 58943, 58950, 58951, 58952, 58953, 58954, 58956, 58957, 58958, 58960

Appendix 2. Codes to identify a live birth or delivery

ICD-10-PCS	10D00Z0, 10D00Z1, 10D00Z2, 10D07Z3, 10D07Z4, 10D07Z5, 10D07Z6, 10D07Z7, 10D07Z8, 10E0XZZ
CPT	59400, 59409, 59410, 59510, 59514, 59515, 59610, 59612, 59614, 59618, 59620, 59622

Appendix 3. Codes indicating a pregnancy

ICD-10	O00-O9A, Z32.01, Z33.x, Z34.x, Z37.x, Z39.x
CPT	59120, 59121, 59130, 59135, 59136, 59140, 59400, 59409, 59410, 59412, 59425, 59426, 59510, 59514, 59515, 59812, 59820, 59821, 59830, 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857, 59610, 59612, 59614, 59618, 59620, 59622

Appendix 4. Codes indicating a known miscarriage, ectopic pregnancy, stillbirth, or induced abortion

ICD-10	O00-O08, O36.4XX0, O36.4XX1, O36.4XX2, O36.4XX3, O36.4XX4, O36.4XX5, O36.4XX9, Z33.2, Z37.1, Z37.4, Z37.7
CPT	59821, 59830, 59120, 59121, 59130, 59135, 59136, 59140, 59812, 59820, 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857

Appendix 5. Codes used to identify use of most or moderately effective contraceptive methods

Description	Codes
Female Sterilization	ICD-10-PCS: 0U574ZZ, 0U578ZZ, 0UL74CZ, 0UL74DZ, 0UL74ZZ, 0UL78DZ, 0UL78ZZ, Z30.2 CPT: 58600, 58605, 58615, 58611, 58670, 58671, 58565 HCPCS: A4264
Intrauterine Device (IUD/IUS)	ICD-10-CM: Z30.014, Z30.430, Z30.431, Z30.433, T83.31XA, T83.31XD, T83.31XS, T83.32XA, T83.32XD, T83.32XS, T83.39XA, T83.39XD, T83.39XS ICD-10-PCS: 0UH90HZ, 0UH97HZ, 0UH98HZ, 0UHC7HZ, 0UHC8HZ CPT: 58300 HCPCS: J7297, J7298, J7300, J7301, J7302, S4989, Q0090, S4981 NDC: 50419042101, 50419042201, 50419042208, 50419042271, 50419042301, 51285020401, 51285020402, 52544003554, 00023585801, 50419042401, 50419042408, 50419042471, 50419042308
Hormonal Implant	ICD-10-CM: Z30.017, Z30.46 CPT: 11981, 11983 HCPCS: J7306, J7307 NDC: 00052027201, 00052027401, 00052027480, 00052433001
Injectable (1-month/3-month)	HCPCS: J1050 NDC: 00009062601, 00009074630, 00009074635, 00009470913, 00009737607, 00009737611, 00247210801, 00703680101, 00703680104, 00703681121, 54569370100,

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Oral Contraceptive Pills	ICD-10-CM: Z30.011, Z30.41 HCPCS: S4993 NDC: 00008253505, 00008253605, 00023586228, 00023586230, 00052026106, 00052026108, 00052028306, 00052028308, 00062190120, 00062190320, 00093214062, 00093209028, 00093209058, 00093214062, 00093313482, 00093313491, 00093330416, 00093330428, 00093330516, 00093330528, 00093532828, 00093532862, 00093542328, 00093542358, 00093542362, 00093603182, 00093603191, 00093614882, 00093614891, 00247052028, 00247069028, 00247069128, 00247069228, 00247151328, 00247151728, 00247176404, 00247176421, 00247176521, 00247198621, 00247198628, 00247200828, 00247201228, 00247201328, 00247214728, 00247216928, 00247217028, 00247223028, 00247223528, 00247226028, 00247226828, 00378728153, 00378655053, 00378655056, 00378727253, 00378727753, 00378728053, 00378728098, 00378728153, 00378728253, 00378728285, 00378728353, 00378728398, 00378728490, 00378728590, 00378728753, 00378728756, 00378729253, 00378729653, 00378729656, 00378729753, 00378729853, 00378730053, 00378730153, 00378730653, 00378730853, 00430000531, 00430001005, 00430042014, 00430042060, 00430042095, 00430048214, 00430048295, 00430053014, 00430053060, 00430053095, 00430053514, 00430053550, 00430053750, 00430054050, 00430057014, 00430057045, 00430057060, 00430058014, 00430058045, 00430058114, 00555034458, 00555071558, 00555900867, 00555900879, 00555900942, 00555900980, 00555901058, 00555901079, 00555901258, 00555901279, 00555901467, 00555901479, 00555901658, 00555901858, 00555902058, 00555902079, 00555902542, 00555902658, 00555902742, 00555902858, 00555903270, 00555903400, 00555903458, 00555903479, 00555904358, 00555904379, 00555904558, 00555904579, 00555904758, 00555904958, 00555904979, 00555905058, 00555905079, 00555905167, 00555905179, 00555906458, 00555906479, 00555906467, 00555906658, 00555906667, 00555906679, 00555912366, 00555913167, 00555913179, 00603359017, 00603359049, 00603751217, 00603751249, 00603752117, 00603752149, 00603752501, 00603752517, 00603752549, 00603754017, 00603754049, 00603760602, 00603760615, 00603760648, 00603760715, 00603760748, 00603760801, 00603760817, 00603760917, 00603761017, 00603761049, 00603762517, 00603762549, 00603763417, 00603763449, 00603764217, 00603766317, 00781405815, 00781406015, 00781406215, 00781406615, 00781407515, 00781410315, 00781410352, 00781411015, 00781557515, 00781558315, 00781558436, 00781565615, 00781565815, 16714034001, 16714034002, 16714034003, 16714034004, 16714034601, 16714034602, 16714034603, 16714034604, 16714034701, 16714034702, 16714034703, 16714034704, 16714034801, 16714034802, 16714034803, 16714034804, 16714035901, 16714035902, 16714035903, 16714035904, 16714036001, 16714036002, 16714036003, 16714036004, 16714036301, 16714036302, 16714036303, 16714036304, 16714036501, 16714036502, 16714036503, 16714036504, 16714036603, 16714036704, 16714037001, 16714037002, 16714037003, 16714037004, 16714040402, 16714040404, 16714040501, 16714040504, 16714040601, 16714040604, 16714040701, 16714040702, 16714040703, 16714040704, 16714040803, 16714041304, 16714041601, 16714041602, 16714041603, 16714041604, 16714044001, 16714044002, 16714044003, 16714044004, 16714044101, 16714044102, 16714044103, 16714044104, 16714046401, 16714046402, 16714046403, 16714046404, 17478026006, 17478026028, 17478026106, 17478026128, 21695040701, 21695068528, 21695076928, 21695077001, 21695077028, 21695085501, 21695085701, 21695099528, 23490765301, 23490767001, 24090080184, 34908062051, 34908062053, 34908062056, 35356001468, 35356001568, 35356002168, 35356025528, 35356037028, 50102010001, 50102010003, 50102010010, 50102010048, 50102012003, 50102012010, 50102012048, 50102012801, 50102012803, 50102013001, 50102013003, 50102013010, 50102013048, 50102013090, 50102015401, 50102015403, 50419040201, 50419040203, 50419040300, 50419040303, 50419040370, 50419040375, 50419040501, 50419040503, 50419040700, 50419040701, 50419040703, 50419040770, 50419040775, 50419040901, 50419040903,

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 51862002801, 51862031801, 51862056401, 68180087311, 63187075428, 51862004701

Patch

ICD-10-CM: Z30.016, Z30.45

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	HCPCS: J7304 NDC: 50458019201, 50458019215, 50458019224, 00378334053
Vaginal Ring	ICD-10-CM: Z30.015, Z30.44 HCPCS: J7303 NDC: 00052027301, 00052027303, 00052027385, 54569586500, 54868483201, 55887075401, 76413013103
Diaphragm	CPT: 57170 HCPCS: A4261, A4266 NDC: 00027013160, 00027013180, 00062330100, 00062330200, 00062330300, 00062330400, 00062330500, 00062330600, 00062330700, 00062330800, 00062330900, 00062331000, 00062331100, 00062331200, 00062331300, 00062334100, 00062334200, 00062334300, 00062334400, 00062334500, 00062334600, 00062334700, 00062334800, 00062334900, 00062335000, 00062335100, 00062335200, 00062338100, 00062338200, 00062338300, 00062338400, 00062338500, 00062338600, 00062338700, 00062338800, 00062338900, 00062364103, 00062364300, 00234005100, 00234013100, 00234013150, 00234013155, 00234013160, 00234013165, 00234013170, 00234013175, 00234013180, 00234013185, 00234013190, 00234013195, 00234013600, 00234013660, 00234013665, 00234013670, 00234013675, 00234013680, 00234013685, 00234013690, 00234013695, 00396401065, 00396401070, 00396401075, 00396401080

Appendix 6. Codes used to identify use of LARC

Description	Codes
Intrauterine Device (IUD/IUS)	ICD-10-CM: Z30.014, Z30.430, Z30.433, Z30.431, T83.31XD, T83.31XS, T83.31XA, T83.32XA, T83.32XD, T83.32XS, T83.39XA, T83.39XD, T83.39XS ICD-10-PCS: 0UH90HZ, 0UH97HZ, 0UH98HZ, 0UHC7HZ, 0UHC8HZ CPT: 58300 HCPCS: J7297, J7298, J7300, J7301, J7302, S4989, Q0090, S4981 NDC: 50419042101, 50419042201, 50419042208, 50419042271, 50419042301, 51285020401, 51285020402, 52544003554, 00023585801, 50419042401, 50419042408, 50419042471, 50419042308
Hormonal Implant	ICD-10-CM: Z30.017, Z30.46 CPT: 11981, 11983 HCPCS: J7306, J7307 NDC: 00052027201, 00052027401, 00052027480, 00052433001

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