

\$100 or \$1,000? Wide price range for birth control

March 9 2012, By LAURAN NEERGAARD , AP Medical Writer

(AP) -- What does birth control really cost anyway?

It varies dramatically, from \$9 a month for generic pills to \$90 a month for some of the newest brands - plus a doctor's visit for the prescription.

Want a more goof-proof option? The most reliable contraceptives, so-called long-acting types like IUDs or implants, can cost \$600 to nearly \$1,000 upfront to be inserted by a doctor.

That's if you don't have insurance that covers at least some of the tab - although many [women](#) do. And if those prices are too much, crowded public clinics offer free or reduced-price options. But it might take a while to get an appointment.

Questions about cost and access to birth control have been swirling for weeks now, intensifying after a Georgetown University law school student testified before congressional Democrats in support of a new federal policy to pay for contraception that she said can add up to \$1,000 a year, not covered by the Jesuit college's [health plan](#). Talk show host Rush Limbaugh's verbal assault on her comments became the latest skirmish in the birth control wars.

Soon, the new policy will make contraceptives available free of charge as preventive care, just like [mammograms](#), for women with most employer-provided health insurance. Churches are exempt. But for other religious-affiliated organizations, such as colleges or hospitals, their

[insurance companies](#) would have to pay for the coverage, something that has triggered bitter political debate.

A major study of nearly 10,000 women that's under way in St. Louis provides a tantalizing clue about what might happen when that policy takes effect.

Consider: Nearly half of the nation's 6 million-plus pregnancies each year are unintended. Rates of [unplanned pregnancies](#) are far higher among low-income women than their wealthier counterparts. Among the reasons is that condoms can fail. So can [birth control](#) pills if the woman forgets to take them every day or can't afford a refill.

Only about 5 percent of U.S. women use the most effective contraceptives - a matchstick-sized implant named Implanon or intrauterine devices known as IUDs. Once inserted, they prevent pregnancy for three, five or 10 years. But Dr. Jeffrey Peipert of Washington University in St. Louis says many women turn them down because of a higher upfront cost that insurance hasn't always covered even though years of pills eventually cost as much.

"How can we cover Viagra and not IUDs?" wonders Peipert, who is leading the new study.

Called the Contraceptive CHOICE Project, the study is providing those options and a range of others for free. Participants also can choose from [birth control pills](#), a monthly patch, a monthly vaginal ring and a once-every-three-months shot. They're told the pros and cons of each but that the long-lasting options have a lower failure rate.

About 75 percent of women in the study are choosing the IUD or the implant, Peipert says. After the first year of the ongoing study, more than 80 percent of the women who chose the long-acting [contraceptives](#)

are sticking with them compared with about half the pill users, he says.

According to the Guttmacher Institute, the average woman who has two children will spend three decades trying to avoid an unintended pregnancy. The Institute of Medicine says that's one reason that women tend to incur higher out-of-pocket costs for [preventive care](#) than men.

Yes, there already are some options for more affordable contraception, such as public clinics or Planned Parenthood.

About 55 percent of local health departments offer some family planning services, according to the National Association of County & City Health Officials. Many of those receive federal Title X funding, which means they can offer contraception on a sliding fee scale. The poorest women may get it free, while others may pay full price or somewhere in between.

There are cheaper generic pills. Peipert says there's little difference between them and pricey new brand-name versions like Yaz.

But some women go through a number of brands before finding one that doesn't cause uncomfortable side effects, says Sarah Brown of the National Campaign to Prevent Teen and Unplanned Pregnancy. Her organization operates a website, www.bedsider.org, that details options along with the price range.

"Not every woman can use generic pills, by any means," Brown says.

"Do we say to people, 'Just go get generic cardiac medicines. Hope that works out for you?'"

Peipert notes that contraception is cheaper than what insurers or taxpayer-funded Medicaid pay for prenatal care and delivery. He says economic studies have found that every \$1 spent on family planning can

save nearly \$4 in expenditures on unintended pregnancy.

Do women ask about the price?

"Oh, my gosh, absolutely," exclaims obstetrician-gynecologist Dr. Monica Dragoman of New York's Montefiore Medical Center.

Just last week, she saw a woman whose heart condition could make another pregnancy life-threatening but who couldn't afford the IUD that Dragoman wanted to prescribe, and chose a cheaper option.

If a family's already struggling financially, "sometimes contraception is one of the first things to fall off," Dragoman says.

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