



The Trump effect? IUD visits rise after election

By Chelsea Rice | January 24, 2017

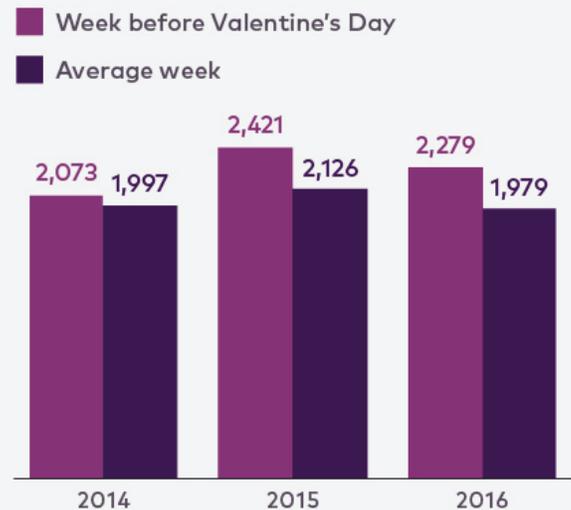
Has anxiety over women's health – which helped turn out millions of protesters across the U.S. last weekend – also steered women to their OB-GYN offices?

New athenahealth data, developed in collaboration with Vox.com, shows a nearly 19 percent increase, after the presidential election, in the number of doctor's visits related to intrauterine devices (IUDs), a form of long-acting reversible contraception.

The analysis examined 1 million patient visits across the athenahealth network of 85,000 providers. Between October and December 2016, visits coded for IUD management or insertion climbed by approximately 19 percent. The majority of those procedures and visits – 92 percent – took place with an OB-GYN provider.

Researchers at athenahealth say this is the first time in five years that the volume of visits for IUD procedures and follow-ups has increased in both November and December.

Number of prescriptions for ED drugs



Source: athenaResearch

Sample: Over 320,000 prescriptions written for approximately 139,000 patients by over 3,200 individual providers on the athenahealth network from 2014 through 2016.

The data follows anecdotal evidence and speculation from the fall, after then-candidate Donald Trump advocated for policies that could change insurance coverage of birth control. Both President Trump and Rep. Tom R. Price of Georgia, Trump's appointee to head the Department of Health and Human Services, have vowed to repeal and replace the Affordable Care Act, which mandates insurance coverage without copays for birth control and contraception devices.

Neither Trump nor Price supports a policy that would continue that coverage.

Depending on insurance coverage, birth control pills can cost between \$160 to \$600 annually, while IUDs and other long-acting reversible contraceptives, known as LARCs, can cost up to \$500 to \$1,000 for the initial insertion, but last for multiple years.

Physicians have noted the financial uncertainty for women as healthcare policy shifts.

"While I certainly hope birth control methods will be readily available under the Trump administration, I can understand women's concern over losing such access, particularly to high cost methods," said Eve Espey, M.D., chair of the American College of Obstetrics and Gynecology LARC work group, in a prepared statement. "All women should be able to make a considered decision about their contraceptive method, but concern about overturning the contraceptive mandate is an opportunity to think about and pursue contraceptive methods, particularly LARCs."

Commercially insured patients made up 75 percent of the athenahealth sample. Among those patients, the rate of IUD-related visits rose by approximately 25 percent after the election. For the Medicaid population, those visits remained constant month-to-month.

As of 2015, according to the CDC, approximately 7 percent of American women were using IUDs, which are 20 times more effective at preventing pregnancy than the pill and last for at least three years.

athenahealth researchers saw an increase in IUD-related visits in counties that leaned both Democratic and Republican in the 2016 presidential election.

"It certainly looks like some women are concerned that full coverage for contraceptive services will be more expensive for them, and so are getting IUDs without cost while they still can," says Josh Gray, vice president of research at athenahealth. "We have one month of evidence so far, so we will update the data at the end of January to see if the trend continues."

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