



WREN

Women's
Rights &
Empowerment
Network

WHAT YOU CAN DO

- Visit scwren.org and join the movement.
- Share this information with friends and community members.
- Keep up-to-date with this and similar legislation by following WREN on Facebook, Twitter, and Instagram.
- Invest in WREN at scwren.org/donate.

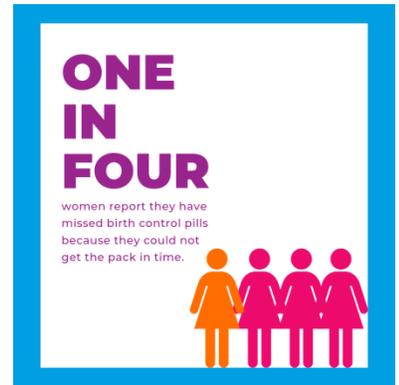
THE POLICY

12-Month Supply of Birth Control Act (H.3279 & S.187)

OVERVIEW

This bill would allow access to a 12-month supply of birth control at one time. Access to a 12-month of birth control at one time has been associated with cost savings, healthier pregnancies, and increases the opportunities that women have to pursue education, advance their careers, and participate in public life.

- Fifty percent of all pregnancies in South Carolina are unintended.¹
- Today, most women must refill their birth control prescriptions each month, which can prove to be a burden for women who lack transportation, live in rural areas, move frequently, or struggle to balance hectic work schedules.
- One in four women report they have missed birth control pills because they could not get the next pack in time.²
- By preventing just one unintended pregnancy, Medicaid will save the cost of prenatal care, labor and delivery, post-partum care and 12 months of infant healthcare- an average \$13,930.³
- Consistent use of birth control is the most effective method of preventing pregnancy among sexually active women.
- In order to prevent pregnancy, birth control pills must be taken every day. Even one missed pill can leave a woman susceptible to an unintended pregnancy.



- According to studies, inconsistent use of contraception accounts for 41 percent of unintended pregnancies.⁴
- Studies show that dispensing a greater supply of contraceptives at a clinical visit is associated with fewer repeat visits, greater contraceptive continuation, and a reduction in the odds of unintended pregnancy.⁴
- Researchers observed a 30 percent reduction in the odds of unintended pregnancy and a 46 percent reduction in the odds of an abortion when women received a 1-year supply of contraceptives, compared to only a one to three month supply.⁵

¹Kost K. (2015). *Unintended Pregnancy Rates at the State Level: Estimates for 2010 and Trends Since 2002*. Retrieved from <https://www.guttmacher.org/report/unintended-pregnancy-rates-state-level-estimates-2010-and-trends-2002>

²Foster, D., Hulett D., Bradsberry, M., Darney, P., and Policar M. (2011). Number of Oral Contraceptive Pill Packages Dispensed and Subsequent Unintended Pregnancies. *Obstetrics and Gynecology*, 117(3), 556-572.

³Sonfield, A. & Kost, K. (2015). *Public Costs from Unintended Pregnancies and the Role of Public Insurance Programs in Paying for Pregnancy-Related Care: National and State Estimates for 2010*. Retrieved from <https://www.guttmacher.org/report/public-costs-unintended-pregnancies-and-role-public-insurance-programs-paying-pregnancy>

⁴California Health Benefits Review Program. (2016). *Analysis of California Senate Bill (SB) 999 Contraceptives: Annual Supply*. Retrieved from <http://chbrp.com/>

⁵Kaiser Family Foundation (2017). *Oral Contraceptive Pills*. Retrieved from <https://www.kff.org/womens-health-policy/fact-sheet/oral-contraceptive-pills/>