Immediate postpartum

The immediate postpartum period, prior to hospital discharge, can be an opportune time to offer contraception. Women may be more motivated to use contraception after giving birth and are known to not be pregnant. Insertion of LARC methods immediately postpartum can also provide access to these methods for women who may not have insurance coverage after delivery or who may not attend their scheduled postpartum follow-up visit.

There are several barriers to provision of LARC methods in the immediate postpartum setting including a lack of provider training, difficulty with stocking issues within the hospital setting, and challenges with obtaining a reimbursement. Payment for delivery is often made using a "global fee" that does not specifically reimburse hospitals for the cost of LARC methods or the insertion procedure on a fee-for-service basis.

As of July 2015, at least 12 Medicaid programs have published guidance providing a mechanism for LARC methods to be reimbursed when provided immediately postpartum in the hospital setting, and one state has clarified that commercial payers are able to separately reimburse for immediate postpartum insertion. An updated list [1] of these policies is available from the ACOG LARC Program.

There are efforts in many other states to advocate for similar changes and to request that commercial payers also include a mechanism for reimbursement separate from the global fee for LARC methods provided immediately postpartum. Materials from the Association of State and Territorial Health Officials [2] and ACOG [3] may provide helpful advocacy resources.