

Public Health Seattle & King County

Client Data Sheet - 2014

Key Points....

An estimated 429,910 women in Washington are in need of publicly funded contraceptive services and supplies.¹

- In 2014, PHSKC served 9,534 family planning clients; 94% of clients obtained care in their home county.

Population groups with greatest need for publicly supported family planning services include women under age 20, women with low income, and women of color.²

- In 2014, 89% of PHSKC's clients had an income at or below 138% of poverty; 46% used Medicaid coverage; and 76% were persons of color.

Access to affordable, effective contraceptive methods is critical to preventing unintended pregnancies.² An estimated 288 unintended pregnancies are prevented per 1,000 users of publicly funded contraceptive services.³

- In 2014, PHSKC's contraceptive services prevented nearly 2,120 unintended pregnancies. This translates to about 1,060 fewer births from unintended pregnancies, 720 fewer abortions and 340 fewer miscarriages.

Long-acting reversible contraceptives (LARC)—intrauterine devices and hormonal implants—are among the most effective methods for preventing unintended pregnancy.²

- In 2014, 84% of PHSKC's female clients used some method of birth control, including 21% who used LARC.

Publicly funded family planning services yield a net saving of \$5.68 for every \$1 invested.⁴

- In state fiscal year 2014, Washington's Medicaid program paid for 41,456 births at an average cost of \$9,253.⁵ An estimated 50 percent of these births were unintended at conception.² The average annual cost for publicly funded contraceptive care in Washington is \$335 per person.³

Public investment in family planning programs also helps avoid cervical cancer, HIV & other sexually transmitted infections, infertility, and preterm and low birth weight births. When these broader benefits are included, the return on investment increases to \$7.09 for every public dollar spent.⁴

Public Health Seattle & King County (PHSKC) is one of 16 agencies contracted by the Washington State Department of Health in 2014 to distribute state and federal (Title X) family planning funds.* In 2014, PHSKC's contract with the Department of Health supported family planning centers in King County.

*15 agencies received state and federal (Title X) funds; 1 agency received state funds only.

Client's County of Residence	County Where Family Planning Services Were Provided
	King
King	8,931 (94%)
Pierce	386 (4%)
Snohomish	171 (1%)
Other	46 (0%)
Total	9,534 (100%)

Age	Females	Males	Total
17 and under	1,011 (12%)	82 (11%)	1,093 (12%)
18-19	1,025 (12%)	102 (14%)	1,127 (12%)
20-24	2,114 (24%)	215 (28%)	2,329 (24%)
25-29	1,796 (21%)	163 (22%)	1,959 (21%)
30-34	1,394 (16%)	77 (10%)	1,471 (15%)
35 and older	1,438 (16%)	117 (15%)	1,555 (16%)
Total	8,778 (100%)	756 (100%)	9,534 (100%)

*All percentages may not add to 100 due to rounding.

Ethnicity & Race	
Non-Hispanic (NH)	
American Indian/Alaska Native, NH	68 (1%)*
Asian, NH	950 (11%)*
Black/African American, NH	1,317 (15%)*
Multiple race, NH	5 (0%)*
Native Hawaiian/ Pacific Islander, NH	236 (3%)*
White, NH	2,190 (24%)*
Hispanic, of any race	4,231 (47%)*
Unknown race and ethnicity	537 (6%)

*Percentage based on total clients with known race/ethnicity.

References:

- Frost JJ, Zolna MR, Frohwirth L. Contraceptive Need and Services, 2010: National and State Report. New York, NY: Guttmacher Institute; 2013.
- Washington State Department of Health. Unintended Pregnancy. Health of Washington State. Olympia, WA: Washington State Department of Health; 2013
- Frost JJ et al. Contraceptive Needs and Services, 2010: Methodological Appendix. New York, NY: Guttmacher Institute; 2013.
- Frost JJ, Sonfield A, Zolna MR & Finer LB. Return on Investment: A Fuller Assessment of the Benefits and Cost Savings of the US Publicly Funded Family Planning Program. Milbank Quarterly, 92: 696-749; 2014.
- Washington Health Care Authority. State of Washington pregnancy related expenditures fiscal years 1988-2014; 2015.

Public Health Seattle & King County Client Data Sheet - 2014

Primary Source of Payment		
Source	No.	%
No Charge (e.g. < 100% FPL)	3,326	35%
Title XIX (Medicaid)	3,797	40%
Take Charge (Medicaid)	534	6%
Private Insurance	616	6%
Other (including full & partial self pay)	1,261	13%
Total	9,534	100%

Note: Primary source of payment is the expected source of payment at time of visit and may not represent the source that eventually paid for the visit.

Clients Receiving Selected Services

Physical Examinations

	No.	%
Initial and annual*	1,569	18%
Breast *	1,569	18%
Pap test*	410	5%
Genitalia**	304	40%

Contraceptive Services

	No.	%
Hormone injection*	258	3%
LARC insert (IUD, IUS & hormonal implant)*	799	9%
Emergency contraception*	3,131	36%
Contraceptive counseling*	8,291	87%

Pregnancy Services

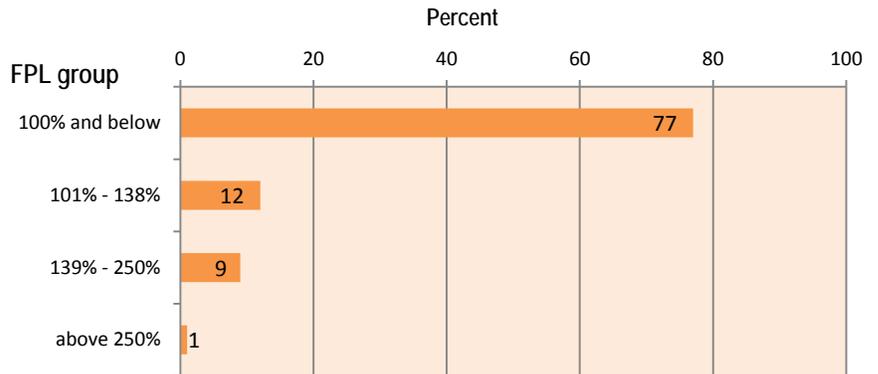
	No.	%
Pregnancy test*	6,262	71%
Preconception counseling*	1,276	15%
Pregnancy counseling*	1,055	12%

STD/HIV Services

	No.	%
Chlamydia test***	4,617	48%
Chlamydia test – females ages 15-24*	2,622	63%
Gonorrhea test***	4,554	48%
STD treatment***	1,395	15%
HIV test***	4	0%
STD/HIV counseling***	6,648	70%

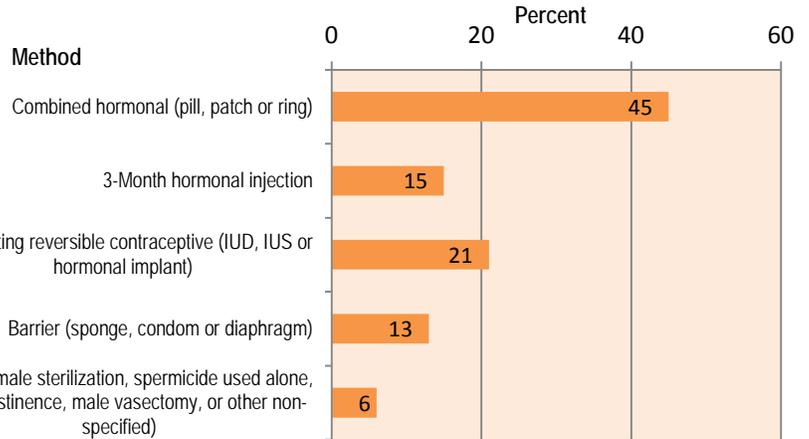
* includes female clients only
** includes male clients only
*** includes female and male clients

Percent of Clients by Federal Poverty Level (FPL)



*In 2014, the federal poverty level (FPL 100%) was \$11,670 annual income for a single person household.

Female Contraceptive Users by Method*



*Includes 8,778 females identified as contraceptive users. Excludes the 1,421 females (16%) who did not use a contraceptive method due to pregnancy or other reason

Use of LARC Among Female Contraceptive Users by Age and Year, 2012, 2013, and 2014

Age	Year		
	2012	2013	2014
10-24	669 (15%)	632 (16%)	642 (18%)
25-34	675 (22%)	704 (25%)	640 (25%)
35 and older	277 (21%)	308 (23%)	288 (24%)
All ages	1,621 (18%)	1,644 (20%)	1,570 (21%)

For people with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY call 711).