

Kitsap Public Health District 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, KPHD served 750 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, 87% of KPHD's clients had an income at or below 138% of poverty; 51% used Medicaid coverage; and 37% 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, KPHD's contraceptive services prevented nearly 130 unintended pregnancies. This translates to about 70 fewer births from unintended pregnancies, 40 fewer abortions and 20 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, 81% of KPHD's female clients used some method of birth control, including 12% 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

Kitsap Public Health District (KPHD) 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, KPHD's contract with the Department of Health supported family planning centers in Kitsap 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	
		Kitsap
Kitsap	705	(94%)
Mason	23	(3%)
Pierce	9	(1%)
Other	13	(2%)
Total	750	(100%)

Age	Females	Males	Total
17 and under	28 (5%)	3 (2%)	31 (4%)
18-19	30 (5%)	7 (4%)	37 (5%)
20-24	126 (22%)	32 (18%)	158 (21%)
25-29	127 (22%)	39 (22%)	166 (22%)
30-34	118 (21%)	28 (16%)	146 (19%)
35 and older	146 (25%)	66 (38%)	212 (28%)
Total	575 (100%)	175 (100%)	750 (100%)

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

Ethnicity & Race	
Non-Hispanic (NH)	
American Indian/Alaska Native, NH	9 (1%)*
Asian, NH	24 (3%)*
Black/African American, NH	49 (7%)*
Multiple race, NH	4 (1%)*
Native Hawaiian/ Pacific Islander, NH	9 (1%)*
White, NH	462 (63%)*
Hispanic, of any race	177 (24%)*
Unknown race and ethnicity	16 (2%)

*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.

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Primary Source of Payment		
Source	No.	%
No Charge (e.g. < 100% FPL)	227	30%
Title XIX (Medicaid)	371	49%
Take Charge (Medicaid)	15	2%
Private Insurance	63	8%
Other (including full & partial self pay)	74	10%
Total	750	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

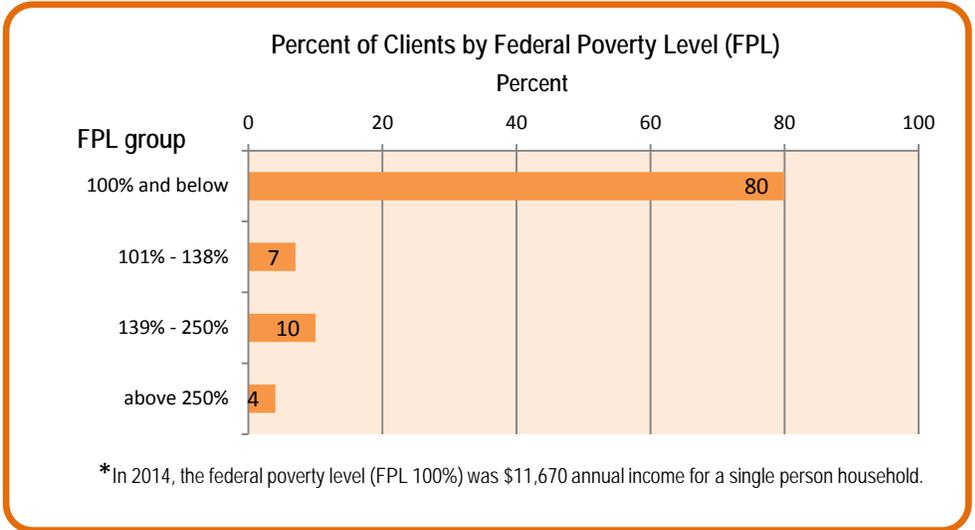
Physical Examinations		
	No.	%
Initial and annual*	209	36%
Breast *	217	38%
Pap test*	175	30%
Genitalia**	130	74%

Contraceptive Services		
	No.	%
Hormone injection*	141	25%
LARC insert (IUD, IUS & hormonal implant)*	17	3%
Emergency contraception*	114	20%
Contraceptive counseling*	542	72%

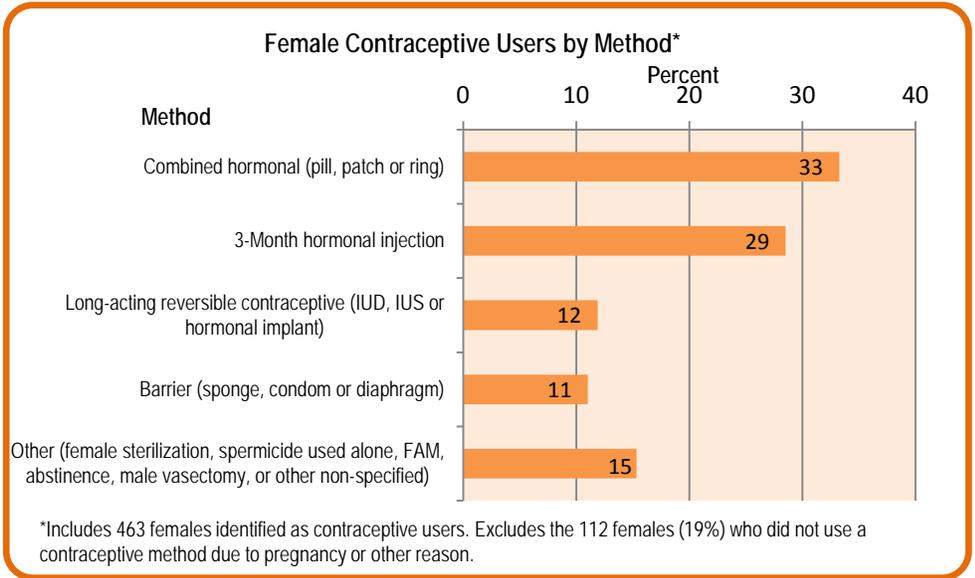
Pregnancy Services		
	No.	%
Pregnancy test*	222	39%
Preconception counseling*	150	26%
Pregnancy counseling*	66	11%

STD/HIV Services		
	No.	%
Chlamydia test***	469	63%
Chlamydia test – females ages 15-24*	130	71%
Gonorrhea test***	472	63%
STD treatment***	51	7%
HIV test***	124	17%
STD/HIV counseling***	486	65%

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



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



*Includes 463 females identified as contraceptive users. Excludes the 112 females (19%) 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	10 (5%)	23 (12%)	16 (11%)
25-34	17 (8%)	31 (13%)	29 (15%)
35 and older	12 (6%)	13 (7%)	10 (9%)
All ages	39 (6%)	67 (11%)	55 (12%)

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