



**STATE OF TENNESSEE**  
**DEPARTMENT OF HEALTH**

JOHN J. DREYZEHNER, MD, MPH  
COMMISSIONER

BILL HASLAM  
GOVERNOR

February 26, 2018

Dear colleagues:

I applaud the efforts of TIPQC and their partners in decreasing barriers to timely access to contraception. As we know, unintended pregnancies may lead to adverse outcomes for both women and children. Accessing contraception is especially challenging for new mothers that are facing many additional responsibilities of caring for a newborn; and often the mother's needs may go unmet. Contraceptive counseling and management is critical in the prenatal and immediate postpartum period to avoid short-interval pregnancies that have additional risks beyond that of other unintended pregnancies.

It is my hope that every birth hospital will think through its own unintended barriers to contraception of all types in the immediate postpartum period and then commit to work with the TIPQC community of practice with the goal of better serving women's reproductive health needs. It our mutual goal that contraception counseling will begin in the prenatal period and that all options would be available to women at the time of delivery. We firmly believe that appropriate counseling is critical in this endeavor. It must be non-coercive, culturally appropriate and client centered and should include advantages, risks, contraindications and alternatives to allow for informed decision making. A woman and any family members or partners she wishes to include in the conversation should fully understand her options and that her decision to receive a method is completely voluntary. Recognizing the importance of language in the contraception conversation, the Tennessee Department of Health has further stressed the importance of "voluntary" by referring to Long Acting Reversible Contraception (LARCs) as Voluntary Reversible Long Acting Contraceptives (VRLACs). We welcome you to consider the use of that language in your own practice as well.

The Tennessee Department of Health applauds the work of TIPQC and partnering facilities, providers, payers in expanding the scope of contraception options available to families. We are proud of the collaborative work that has made this project a reality, and we welcome you to this shared quality improvement opportunity.

Sincerely,

A handwritten signature in blue ink, appearing to read "John J. Dreyzehner", with a small "ms" mark at the end.

John J. Dreyzehner, MD, MPH, FACOEM  
Commissioner