

R SHEET ON PHARMACY ACCESS TO CONTRACEPTION IN MASSACHUSETTS

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BACKGROUND

In the last several years, 10 states and the District of Columbia have passed pharmacy access bills, which allow pharmacists to prescribe hormonal contraception to women. These efforts expand the scope-of-practice for pharmacists and increase access to birth control for women—especially those who may not have a regular physician or find that an appointment is too costly. Such advances are critical, to the prevention of unintended pregnancy.

In Massachusetts, nearly one-third of women of reproductive age use short-acting hormonal contraception such as transdermal patches, birth control injections or birth control pills. The latter are the most popular form of female contraception in Massachusetts.

Accordingly, it is easy to see how increased access can help women. In 2010, the latest year data is available, 47 percent of pregnancies in Massachusetts were unplanned. Nationally, the rate of unintended pregnancies peaked in 2008 at 51 percent of pregnancies and has declined since. It is important to note that this decline is a result of women using more effective contraception, more often than in the past. Adopting a pharmacy access model in Massachusetts would therefore offer women increased access to effective contraception, especially in rural areas where it is less accessible. In turn, this would help avoid unintended pregnancies and their effects.

Currently, unintended pregnancies in Massachusetts come at a high cost. In 2010, the publicly funded medical expenses associated with 56 percent of unplanned births in the state cost almost \$358 million—\$138.3 million of which was shouldered by the state government.

CURRENT DEBATE

Pharmacy access has seen little opposition in the medical community. In fact, the American College of Obstetricians and Gynecologists (ACOG) believes that no prescription should be necessary for hormonal contraception like birth control pills.

SUMMARY

- Many women have limited access to contraception.
- Nearly half of pregnancies in Massachusetts are unplanned.
- Taxpayers have spent over \$350 million to cover the medical costs associated with unplanned pregnancy.
- Allowing pharmacy access has no adverse fiscal impact on the Board of Pharmacy or the state.
- Massachusetts should pass MA SD 102 to expand pharmacists' scope-of-practice and give women more family planning options.

While, over-the-counter access to birth control—that is, without a prescription—is a federal issue, states have been increasingly implementing the pharmacy access model with the goal of expanding consumer choice. Since 2015, states as politically diverse as Utah and California have allowed pharmacists to prescribe hormonal contraception.

Pharmacy access is crucial for two reasons. First, it allows women to have an increased number of contraception providers that are more accessible. Pharmacies are typically much more prevalent than doctor's offices, especially in more rural parts of the state. Second, it expands scope-of-practice for pharmacists who already provide the services needed for a birth control examination. Current regulations impede pharmacists' ability with no credible rationale.

Allowing pharmacists to prescribe birth control follows a successful precedent in other states and has the potential to reduce the taxpayer burden for unintended pregnancy and abortions. This can be done without negative side effects because hormonal contraception is a safe, time-tested and effective method of avoiding unwanted pregnancy.

ACTION ITEMS

For these reasons, Massachusetts should pass MA SD 102 to allow pharmacists to prescribe birth control to patients seeking a provider. This model has passed in a number of states since 2015, and it has shown great promise.

The pharmacy access paradigm removes unnecessary regulations; provides women with more, easier-to-access healthcare options; and reduces public health expenditures.

Pharmacy access to contraception also expands the scope-of-practice for pharmacists, allowing them to perform a medical service that is well within their expertise. Encouraging pharmacists to become birth control providers, especially in rural areas, increases access to medical care in areas that typically lack providers.

CONTACT US

For more information on this subject, contact the R Street Institute: 1212 New York Ave NW Suite 900, Washington D.C. 20005, 202.525.5717.



Courtney M. Joslin
Commercial Freedom Fellow
cmjoslin@rstreet.org
202-900-9736



Nicolas John
Northeast Region Director,
State Affairs
njohn@rstreet.org
617-275-3664