



1212 New York Ave. NW
Floor 9
Washington, DC 20005
202.525.5717

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Testimony from:

Courtney Joslin, Commercial Freedom Fellow, the R Street Institute
Marc Hyden, State Government Affairs Director, the R Street Institute

In SUPPORT of HB 1164, “TO AUTHORIZE A PHARMACIST TO DISPENSE ORAL CONTRACEPTIVES WITHOUT A PRESCRIPTION.”

February 18, 2019

House Public Health, Welfare and Labor Committee

Chairman and members of the committee,

Today, 10 states and the District of Columbia allow pharmacists to prescribe hormonal contraception to patients. These states are Tennessee, Utah, New Hampshire, Colorado, Oregon, Washington, California, Maryland, New Mexico and Hawaii.

Expanding pharmacists’ scope-of-practice to include dispensing birth control without a prescription permits them to perform medical services that they are well-equipped to administer. A typical doctor’s visit to obtain birth control includes a self-reported medical questionnaire, a blood pressure test and a quick chat with the doctor about which types of contraceptives are right for the patient. Pharmacists can expertly perform all of these activities.

Furthermore, expanding the number of birth control providers increases access to safe and effective contraception, which is desperately needed. In 2017, Arkansas [led the nation in teenage pregnancy rates](#), and in 2011, [55 percent of all pregnancies in Arkansas](#) were unintended, which is one of the highest rates in the country. This is due, in part, to limited access to doctors, especially in rural areas. In fact, Arkansas’ [physician-to-population ratio](#) is one of the lowest in the country. Put simply, increasing the number of health care providers increases the number of accessible avenues to obtain birth control.

Each unintended pregnancy strains mothers and families, and can also increase the taxpayer burden. In 2010 alone, the public funded medical expenses associated with over [72 percent of unplanned pregnancies in Arkansas](#), costing taxpayers over \$328 million — of which the state of Arkansas funded nearly \$62 million. Allowing pharmacy access could significantly reduce the number of unintended pregnancies and the amount of tax dollars spent on them.

Over the past several years, the pharmacy access model has gained traction in many states, and medical professionals have largely endorsed the idea of providing easier access to birth control. In fact, the American College of Obstetricians and Gynecologists has stated that [birth control should be available over-the-counter](#). This is because it is safe and effective, and because women should be able to choose the method they prefer without the unnecessary intermediation of a doctor.

Similarly, the pharmacy access model proposed in HB 1164 has shown great promise. If enacted, it will reduce unnecessary regulation, broaden consumer choice, provide better healthcare access for women and could save millions of taxpayer dollars. Most importantly, this can all be accomplished without increasing risks. Thus, it is vital that the Legislature give HB 1164 serious consideration.

Thank you for your time,

Courtney Joslin
Commercial Freedom Fellow
The R Street Institute
(865) 414-5466
cmjoslin@rstreet.org

Marc Hyden
State Government Affairs Director
The R Street Institute
(404) 918-2731
mhyden@rstreet.org