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Testimony from:
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Contraception Access in the States

March 6, 2019

Health Care Licenses Committee Hearing

Chairwoman and members of the committee,

My name is Courtney Joslin and I am a Commercial Freedom Fellow for the R Street Institute, a nonprofit, nonpartisan public policy research organization. Our mission is to engage in policy research in many areas, including access to hormonal contraception. I lead R Street's research on the pharmacy access model, and I appreciate the opportunity to discuss birth control paradigms and best practices regarding contraceptive access in the states.

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

Expanding pharmacists' scope-of-practice to include prescribing birth control 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 means more women can access safe and effective contraception. In 2011, 45 percent of pregnancies in the United States were unintended. This has negative outcomes, both with respect to maternal health and public expenditures. For example, in 2010 alone, federal and state governments spent over \$21 billion on the medical costs associated with unintended pregnancies. Of that, state governments shouldered nearly \$6.4 billion.

In part, this is because many women—especially in rural areas—face limited access to doctors. Put simply, increasing the number of healthcare providers opens more doors for obtaining effective birth control. Given this, allowing pharmacy access could significantly reduce the amount of tax dollars spent on unintended pregnancy costs.

Over the past several years, the pharmacy access model has gained traction in many states, and medical professionals have largely agreed with making access to birth control easier. In fact, the American College of Obstetricians and Gynecologists has stated that birth control should be over-the-counter instead of prescribed. This is because it is safe and effective, and women are capable of choosing the method that works best for them without the unnecessary intermediation of a doctor.

Thank you for your time,

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