

R SHEET ON

PHARMACY ACCESS TO CONTRACEPTION IN MASSACHUSETTS

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BACKGROUND

n 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, where unintended pregnancy rates are high. In 2011, which is the latest year national data is available, 47 percent of pregnancies in the state were unplanned.

Moreover, as the Massachusetts Department of Public Health has reported, unintended pregnancies in Massachusetts result in costly public health expenditures. In 2010, publicly funded medical expenses associated with 56 percent of unplanned pregnancies in Massachusetts were nearly \$358 million; \$138.3 million of which was paid for by Bay State taxpayers.

CURRENT DEBATE

While over-the-counter access is a federal issue and for that reason is more complicated, one way states have attempted to increase access is by adopting a pharmacy access model, in which pharmacists can directly prescribe birth control to patients who meet certain conditions. This model is gaining in popularity and is now in use in 16 states and the District of Columbia.

And, what's more, the states that have adopted pharmacy access are politically diverse-from Utah and New Hampshire to West Virginia, Washington and D.C.

Those who still oppose pharmacy access claim that hormonal birth control is not safe enough for pharmacists to prescribe or that it is an ineffective way to increase birth control access. However, leading medical organizations, like the American College of Obstetricians and Gynecologists (ACOG) and the American Academy of Family Physicians (AAFP) actually contend that hormonal birth control like the pill is safe enough for complete over-thecounter access with no prescriber at all.

SUMMARY

- Many women have limited access to contraception.
- Nearly half of pregnancies in Massachusetts are unplanned.
- Massachusetts taxpayers spent over \$350 million to cover the medical costs associated with unplanned pregnancy in 2010.
- Allowing pharmacists to prescribe hormonal birth control reduces unintended pregnancy, saves taxpayer money and increases access to care.
- Massachusetts should pass S.1309 to allow this model.

ACTION ITEMS

Hormonal birth control has a more than 60-year record of safety and generally speaking, women are capable of competently identifying contraindications themselves. In any cases where they may be unable to, however, pharmacists are trained specifically to do so and for this reason expanding their scope of practice to prescribe birth control not only better utilizes their existing skills, but also increases access to contraception for a greater number of women. And this is especially true in rural areas where it is less accessible and where individuals may not have a regular physician nearby, or the resources to attend or pay for a doctor's appointment.

Indeed, allowing pharmacists to prescribe lowers the barriers to obtaining birth control significantly, as 90 percent of the U.S. population lives within five miles of a community pharmacy, and pharmacies usually offer longer hours than the traditional 9-5 of a medical office. This more flexible access is vital particularly to uninsured and lower-income women.

In addition to these benefits, pharmacy access has already demonstrated that it can help to prevent unintended pregnancy. For example, in Oregon, where pharmacists can

prescribe birth control, the number of unintended pregnancies among the Medicaid population was reduced. Costs associated with unplanned pregnancy also went down, as the state saved \$1.6 million in the first two years of pharmacists prescribing birth control.

For these reasons, Massachusetts should pass S. 1309, as it has the potential to reduce unintended pregnancy; save state funds spent on healthcare costs; and to reach women for whom obtaining a birth control prescription is currently too costly or difficult.

CONTACT US

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