



Oregon Pharmacists Tasked to Improve Access to Hormonal Birth Control

Oregon pharmacists have been asked to accept the challenge to increase safe access to hormonal birth control in a bill recently signed by Governor Brown. Rep. Knute Buhler, a physician in Bend, Oregon, working with colleagues in the legislature envisioned a process through which patient access to prescriptions for self-administered hormonal birth control could be enhanced. Patient safety concerns were addressed by assuring involvement of one of the country's most trusted professionals, pharmacists.

The final version of HB 2879 involved consultation with the Oregon State Board of Pharmacy and collaborative discussions among representatives from several health professions. The American College of Obstetricians and Gynecologists has called for improved access to contraceptives for women, including the possibility of over-the-counter status. Their studies indicate that women who are at risk for unintended pregnancy would readily access all forms of self-administered birth control and can effectively self-screen for contraindications to hormonal therapy.

The Oregon law retains prescription status for self-administered hormonal birth control, but asks pharmacists to accept the role of prescriber following collaboratively developed rules, that will include completion of a patient-administered self-screening tool. Pharmacists are well prepared with regard to therapeutic options, benefits, and risks associated with the use of different hormonal birth control products, but will complete additional specialized education to familiarize them more fully in drug selection when initiating therapy. The State Board of Pharmacy, in consultation with the Oregon Medical Board, State Board of Nursing, and Oregon Health Authority are charged to define educational requirements and develop rules that will govern practice.

Pharmacists' status as healthcare providers and the important role that they play in collaborative patient care was confirmed by the legislature earlier in the 2015 session. Passage of HB 2028 allowed for development of additional protocols for pharmacist initiation of self-diagnostic therapies and collaborative management of chronic diseases. Utilizing pharmacists will assist in decreasing unintended pregnancies, while helping to maximize patient safety. Pharmacist prescribing of self-administered hormonal birth control, like pharmacist administered immunizations, is an opportunity to utilize the capabilities of the drug experts in the healthcare system to address a significant public health need.

Oregon Pharmacists Tasked to Improve Access to Hormonal Birth Control

Frequently Asked Questions:

Passage of HB 2879 allows for the development of rules which will allow pharmacists to act as the prescriber of self-administered hormonal birth control.

What does this really mean?

What is the purpose of this law?

The purpose is to increase access to self-administered hormonal birth control, while addressing safety concerns, resulting in a decrease in unwanted pregnancies.

How was the concept initiated?

Rep. Knute Buhler, a physician in Bend, Oregon, working with colleagues in the legislature envisioned a process through which patient access to prescriptions for self-administered hormonal birth control could be enhanced. The final version involved consultation with the Oregon State Board of Pharmacy and collaborative discussions among representatives from several health professions.

Are all types of birth control included?

No. Only self-administered oral or transdermal products are included.

Will I have to use pharmacist prescribed birth control?

No. The intent of the law is to expand access. It does not eliminate or limit any existing relationships with providers, or drug delivery processes currently used by patients.

Will pharmacist prescribed birth control be covered by insurance?

Yes. Both state and federal guidelines require insurance coverage for birth control.

Can all women access birth control through pharmacist prescribing?

All women 18 years old and greater can obtain medication through pharmacist prescribing. Women under the age of 18 must first demonstrate that they have been previously prescribed an oral contraceptive by a primary care provider. This restriction is scheduled to sunset in two years.

Are pharmacists required to participate in prescribing birth control?

All pharmacists have the capacity and opportunity to participate. Some pharmacists may decline to participate based on moral beliefs. This is allowed in Oregon rules, but there is a professional responsibility to refer the patient to an alternative pharmacy service provider.

Are pharmacists educated to adequately understand drug therapy and make decisions on drug therapy?

Yes. Today's typical pharmacy graduate in Oregon has first completed a Bachelor's degree, is selected for admission through a competitive process, and then completes the equivalent of four years of professional education, including classroom and direct patient care experiential education. All pharmacists are also required to complete ongoing continuing education.

How will the pharmacist know what is the best drug product?

A patient administered self-assessment survey will help to guide product selection. Pharmacists will also complete additional specialized education, defined by the State Board of Pharmacy, to complement their existing strong knowledge of drug action and drug products.

Is there precedent for providing access to birth control without a physician's prescription?

The American College of Obstetricians and Gynecologists has called for improved access to contraceptives for women, including the possibility of over-the-counter status. Studies have suggested that patients with an appropriate survey document can effectively self-screen for risks. California has passed similar legislation and are also in the process of writing rules and enhancing pharmacist education.

Who accepts the risk for side effects resulting from the use of birth control?

All medications, including over-the-counter medications have risks associated with them. The Oregon law involves pharmacists, rather than providing medications over-the-counter, to assure patients have a partner in assessing possible risks or side effects. Pharmacists, as for any professional, accepts responsibility for decisions made and carry liability insurance to protect the patient and the pharmacist.

When will pharmacist prescribing of birth control be available?

The law allows pharmacist prescribing as early as January 1, 2016, but it is likely that it will not be widely implemented until midyear 2016. The State Board of Pharmacy (in consultation with the Oregon Medical Board, State Board of Nursing, and Oregon Health Authority) must first define rules to guide practice and any additional educational requirements for pharmacists. Next, pharmacists must complete the educational unit and, finally, pharmacies must determine how to best incorporate this clinical service into their workflow.

What is the position of the state pharmacy association on pharmacist prescribing?

The Oregon State Pharmacist Association is an advocate for full utilization of pharmacists' expertise to positively impact the health and wellness of all Oregonians. Pharmacists' initiation of therapy when a diagnosis is not required, or post-diagnostic management of diseases in collaboration with other health professionals is impactful and certainly within the scope of a pharmacist' education and skillset.