

TITLE: Pharmacist provision of hormonal contraception: the first year of implementation in Oregon's Medicaid program

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STUDENT SUBMISSION: No

TOPIC/TARGET AUDIENCE: Policy makers, researchers

ABSTRACT: Introduction: Oregon's policy, House Bill (HB) 2879 allowed pharmacists to prescribe the hormonal pill and patch. This study assessed the impact of pharmacist provision on contraceptive access among low-income women in Oregon. Methods: Using Oregon Health Plan (OHP) enrollment and claims data and provider files, we identified pharmacists who had registered with OHP and women ages 15-44 enrolled in Medicaid for at least 80% of 2015-2016. We compared receipt of the contraceptive pill among women living in an area with a prescribing pharmacist to those without a prescribing pharmacist. Results: Of 335,516 women ages 15-44 ever enrolled in Medicaid in 2016 with valid zip code information, 79.9% lived in a zip code tabulation area (ZCTA) with a prescribing pharmacist. For women enrolled in both years, pill prescriptions were filled by 10.2% of women in 2015 (17,363/170,517) and by 9.5% (16,179/170,517) of women in 2016 ($p = 0.001$). Pill receipt in 2016 was similar for women living in ZCTAs with and without a prescribing pharmacist ($p = 0.61$). Conclusion: In the first year of implementation, pill receipt declined and did not differ for women living near participating pharmacists, suggesting that the policy has not yet had an impact on population-level contraceptive use. (200 words)

OBJECTIVE(S): Describe Medicaid-registered pharmacist participation in the first year of implementation of a policy allowing pharmacists to prescribe hormonal contraception. Compare contraceptive pill receipt among low-income women before and after implementation of a policy allowing pharmacists to prescribe hormonal contraception. Compare contraceptive pill receipt among low-income women living in areas with and without pharmacists prescribing hormonal contraception.
