

## Emergency Contraception (EC) Pharmacy Access Programs

	Alaska	California	Hawaii	Maine	New Mexico	Washington
Beginning of Pharmacy Access to EC	Approved April 26, 2002.	Effective Jan. 1, 2002 by legislative statute.	Approved June 24, 2003 by legislative statute. Implementation pending Board of Pharmacy approval.	Effective July 1, 2004 by legislative statute.	1992 and 2001: Pharmacists given prescriber status. Dec. 2002: regulations for EC accepted.	1997: Launch of successful 2-year pilot program based on previously existing pharmacy access protocol.
Authorized Prescriber	MD, Nurse Practitioner.	MD or State Board of Pharmacy and Board of Medicine.	MD only.	Expected: MD, Nurse, Nurse-Midwife, PA.	State Pharmacy Board.	MD, Nurse Practitioner.
Protocol for Collaborative Therapy Agreements	Individually determined. Protocol permits distribution up to 120 hours after sex.	Individually determined. Statewide protocol has been established by legislative statute. Protocol permits distribution up to 120 hours after sex.	Individually determined.	Individually determined.	Statewide protocol accepted in May 2003.	Individually determined, covering all pharmacists in each pharmacy.
Components of Pharmacy Assessment	Informed consent form; screening checklist.	Mandated EC fact sheet; encounter form; referrals and/or counseling as appropriate.	Informed consent form; screening checklist.	Informed consent form; EC fact sheet.	Informed consent form; EC fact sheet; assessment questionnaire; counseling on future pregnancy prevention.	Informed consent form; screening checklist.
Cost	Product generally \$20-25; consultation fees make typical package \$40.	Product generally \$20-25. Max. \$10 pharmacist assessment and consultation fees.	Prices set by individual pharmacies.	Information unavailable.	Product generally \$29; consultation fees range from \$25-30.	Product generally \$20-25; average service fee is \$25. Some pharmacies offer all-inclusive package for \$35-40.
Payment	EC rarely covered under insurance plans. Medicaid covers Plan B.	EC product covered by CA's Family PACT Program for low-income women. MediCal working to cover Plan B. HMOs offering prescription drug coverage are required to cover EC.	EC product covered by several of the largest insurance companies in the state. Consultation not covered.	Medicaid (MaineCare) covers Plan B.	EC product is covered by several insurance companies and Medicaid.	EC covered by medical coupons, welfare, Uniform Medical Plan (option for state employees), Medicaid DSHS.
Pharmacist Participation	~15 currently working.	~2,500 currently trained.	~100 pharmacists trained, but implementation still pending.	Not available.	160 certified pharmacists; 54 technicians; 7 nurses. All pharmacy students are trained.	~1200 community pharmacists; 90% of graduating pharmacy students trained.
Prescriber Participation	4 physicians and 2 Nurse Practitioners.	Small number of prescribers (primarily Planned Parenthood medical directors).	Not available, but physicians have not taken proactive role in promoting EC.	Not applicable.	Not applicable.	Roughly 250 protocols are on file, implying a similar number of participating prescribers.

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Pharmacy Participation	18 participating pharmacies, including two chains, several independents, and Native corporations.	About 1130 participating pharmacies, half of which are chain stores. Almost all counties have EC pharmacies.	Longs, Times, and Kaiser Permanente HI pharmacies are expected to participate.	Data not yet available.	36 participating pharmacies (~24%), including several chains. Access in 18 communities.	~660 participating pharmacies.
Public Awareness Efforts	Alaska EC Project ( <a href="http://www.alaskaec.org">www.alaskaec.org</a> ) and Planned Parenthood. Previously: Newspaper advertising; screen ads in movie theaters. Currently: campus and shelter outreach; negotiations for radio.	<a href="http://www.ec-help.org">www.ec-help.org</a> ; toll free Hotline (800-323-1336); distribution of consumer materials including non-English to CBOs and at conferences; materials for professionals; radio ads; op-eds; ethnic, alternative, and youth print ads.	Department of Health -sponsored radio ads on progressive stations. Planned Parenthood Hawaii also promotes EC.	2002 grant used for creation of EC Hotline, pharmacy outreach, cards to hand clients. 2004 grant for additional pharmacist and practitioner education.	Planned Parenthood ad campaign. Department of Health also used billboards, TV, and radio ads.	School presentations pitched EC as option to prevent unintended pregnancy. Current effort to make EC part of standard counseling for all birth control users.
Data on EC Services	Not available.	2002, 2003, 2004 Pharmacy Access Partnership studies of pharmacy participation, EC hotline/website activity, and EC consumer experience. 2004 survey by the Kaiser Family Foundation.	2001-2 survey by Healthy Mothers, Healthy Babies Coalition of Hawaii of Family Planning, ERs, Pregnancy Counseling Centers, MDs and pharmacists.	Not available.	2004 NM Pharmaceutical Association study of pharmacist EC prescribing. Forthcoming study by Dr. Espey and the University of New Mexico on EC access.	Pharmacist and consumer satisfaction survey administered during the pilot program, which began in 1998.

#### Acronyms

CBO - Community Based Organization	DSHS - Department of Social and Health Services
ER - Emergency Room	HMO - Health Maintenance Organization
MD - Medical Doctor	PA - Physician's Assistant

#### Notes

*Preven™ combined emergency contraception product is no longer being manufactured in the United States, but may still be available in limited quantities in pharmacies. Some protocols permit pharmacists to dispense daily birth control pills (used according to the Yuzpe Regimen) if Plan B is not available.*