

# CCPS



**Growth. Performance. Success.**

**2024 ANNUAL CONVENTION**



# A Step-by-Step Guide for Incorporating Hormonal Contraceptive Prescribing in Your Pharmacy Practice

---

**NCPA 2024 Annual Convention and Expo**

Columbus, Ohio

# Speaker



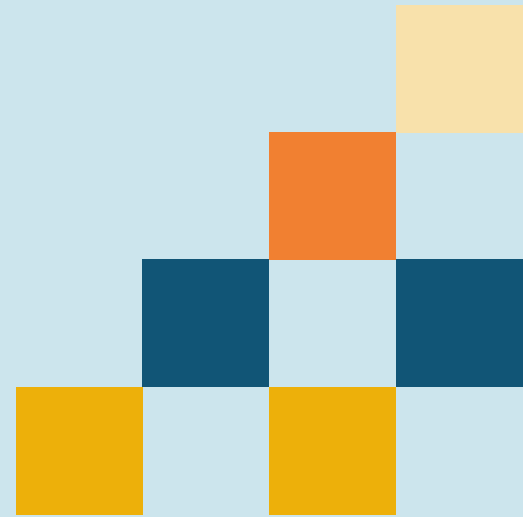
**Jenny Wells, Pharm.D.**  
Pharmacist-In-Charge  
The Pharmacy at Wellington  
Little Rock, AR



**Brittany Sanders, PharmD**  
Owner  
The Pharmacy at Wellington  
Little Rock, AR

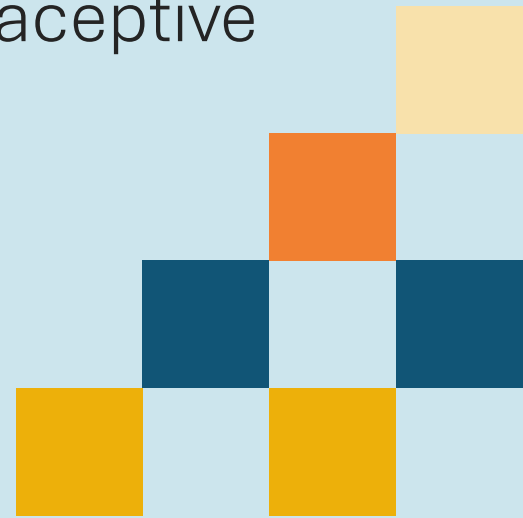
# Disclosure Statement

There are no relevant financial relationships with ACPE defined commercial interests for anyone who was in control of the content of the activity.



# Pharmacist and Technician Learning Objectives

1. Describe best practices for incorporating hormonal contraceptive prescribing into existing pharmacy workflows.
2. Discuss entry-level and advanced marketing strategies for promoting hormonal contraceptive prescribing to patients and providers.
3. Review medical billing opportunities for hormonal contraceptive prescribing.



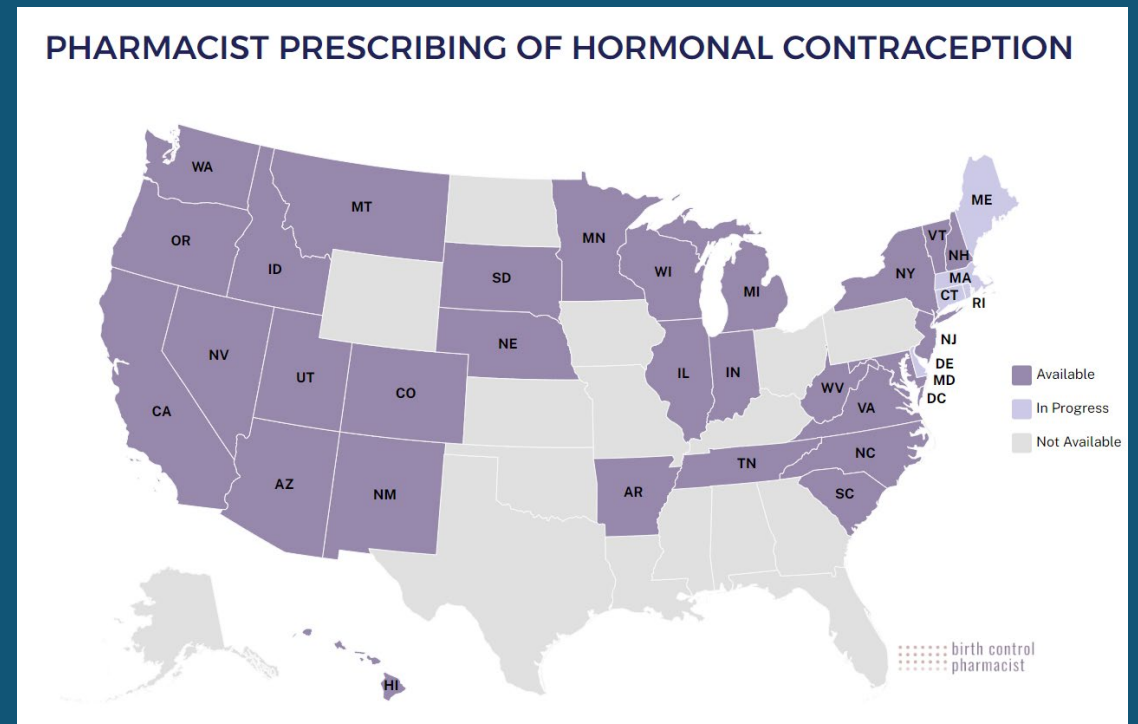


# The Need for Pharmacist-Prescribed Hormonal Contraceptives

- 35.7% of U.S. Pregnancies are unintended (CDC)
- Unintended pregnancies cost taxpayer dollars **\$11 billion annually.**
- 7 million women live in maternal health deserts with limited or no obstetric care
- **Pharmacists** are uniquely positioned to help prevent unintended pregnancies and expand women's health access.

# Pharmacist Prescribing of Birth Control: State Overview

- **23 States:** Active legislation allowing pharmacists to prescribe birth control
- **6 States:** Utilize Collaborative Practice Agreements for pharmacist prescribing
- **6 States:** Policies in progress—soon to expand access
- **Types of Contraceptives Prescribed:** Depending on the state, pharmacists may prescribe:
  - Oral Contraceptives
  - Patch
  - Vaginal Ring
  - Injectable (Shot)
  - Non-hormonal methods (New Mexico)
- **Age Restrictions:** 11 states require patients to be **18 years or older**







<https://birthcontrolpharmacist.com/resources/policies/>

# HOW WELL DOES BIRTH CONTROL WORK?

What's your chance of getting pregnant in a year?

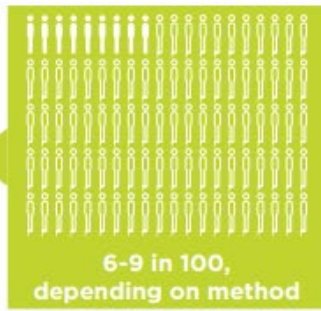
★★★★★  
Really, really well

			
<b>Implant</b>	<b>Hormonal IUD</b>	<b>Copper IUD</b>	<b>Sterilization</b>
Works as birth control... <b>Up to 5 years</b>	<b>Up to 8 years</b>	<b>Up to 12 years</b>	<b>Forever</b>



★★★★★  
Really well

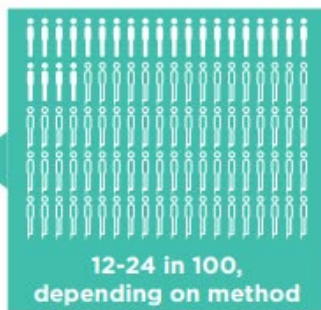
			
<b>Pill</b>	<b>Patch</b>	<b>Ring</b>	<b>Shot</b>
For it to work best, use it... <b>Every day</b>	<b>Every week</b>	<b>Every month</b>	<b>Every 3 months</b>



★★★  
Pretty well

			
<b>Pulling Out</b>	<b>Fertility Awareness</b>	<b>Internal Condom</b>	<b>Condom</b>
For each of these methods to work, you or your partner have to use it every time you have sex.			

Can be used alone or with another method for STI protection.



More than 85 in 100 without birth control.



This work by the UCSF School of Medicine Bixby Center and Power to Decide/Bedsider is licensed as a Creative Commons Attribution - NonCommercial - NoDeriv 3.0 Unported License. Updated December 2023.

[https://beyondthepill.ucsf.edu/sites/beyondthepill.ucsf.edu/files/Tiers%20of%20Effectiveness\\_English-043019.pdf](https://beyondthepill.ucsf.edu/sites/beyondthepill.ucsf.edu/files/Tiers%20of%20Effectiveness_English-043019.pdf)





# Advocacy for Pharmacist Prescriptive Authority

- **State Legislatures Drive Progress**

- Support from state lawmakers is key to expanding pharmacist roles.

- **Corporate Push for Clinical Roles**

- Major chains (e.g., Walmart) advocate for pharmacists in clinical spaces.

- **Steps to Get Started**

1. Draft model legislation.
2. Find a supportive sponsor.
3. Engage community pharmacists.
4. Meet with state legislators.

# Where to Begin

- **Assess and Address Hesitations**
  - Identify personal or professional concerns about prescribing and develop strategies to overcome them.
- **Create an Approachable Environment**
  - Make your pharmacy a welcoming, accessible place for patients seeking birth control.
- **Foster Team Collaboration**
  - Align your team around shared goals to actively engage potential patients.
- **Identify Potential Patients:**
  - Recently out of refills.
  - No current women's health provider or between PCPs.
  - Women of childbearing age on GLP-1s.

A woman with long dark hair and glasses, wearing a white lab coat over a light blue shirt, is giving a thumbs up. She is in a pharmacy setting with shelves of medicine in the background. The image has a light blue overlay and decorative colorful squares in the corners.

# Establish a Pharmacy Workflow

Oral Contraceptive Consultations

# Preparing Your Pharmacy

- **Supplies Needed:**
  - Private space for a consultation such as an immunization room complete with a chair
  - 2 clipboards and pens
  - Automated and/or manual blood pressure cuff
  - Reference binder appropriate for your state specific protocol





# Tips on Integrating into Workflow

- **Adopt an Appointment-Based Model**
  - Plan ahead and manage time efficiently.
- **Prepare in Advance**
  - Have paperwork and billing ready for appointments.
- **Maximize Team Efficiency**
  - Delegate tasks to team members to streamline the process and reduce stress.



# Example Workflow

Patient arrives to the pharmacy and is given both the screening and consent forms

Patient returns forms to a staff member and the consultation fee is determined

Pharmacist reviews the completed forms and references the summary chart of U.S. Medical Eligibility Criteria (MEC) for contraceptive use – ***UPDATED 2024!***



Pharmacist determines if the patient is eligible for contraceptive services offer

Pharmacist calls patient into the consultation area

# Example Workflow (2)

Pharmacist reviews the completed forms with the patient and checks blood pressure

Pharmacist either proceeds in prescribing contraceptives with appropriate number of refills OR refers the patient to a higher level of care (i.e.: women's health provider)

Patient waits in the pharmacy lobby while prescription is filled

Pharmacist provides required paperwork (e.g.: Patient Handout and completed consent form) with bagged Rx

Rx is sold to the patient

# Example Workflow (3)

Pharmacist completes the required reporting (such as to the health department)

Pharmacist Visit Summary is forwarded to the patient's provider, if consent is given on screening form

Other billing options are submitted, such as third party medical billing portals.



# Other Considerations in Workflow

- If the patient must be referred out or pregnancy cannot be ruled out – counsel on other OTC contraceptive options such as condoms and/or emergency contraceptives.
- Option to administer the HPV Vaccine.
- Offer nicotine cessation services, if applicable.
- If you cannot proceed with prescribing, remember the encounter is still a billable service.

# Role-Play Activity

Let's Practice!

# Staff Roles

## Pre

Who: Technician, student, other

- Verify active insurance and determine co-pay
- Prepare Paperwork

## During

Who: Technician, student, other

- Welcome patient
- Provide patient with necessary forms

Who: Pharmacist

- Perform the consultation
- Assess documents
- Write and process the prescription
- Counsel
- Provide patient with documentation

## Post

Who: Technician, Student, Pharmacist, other

- Manually submit claim to insurance
- Submit required reports to department of health
- Claim reconciliation

# Marketing Your Services



- **Soft Launch**
  - Start small and refine your approach.
- **Email blasts**
  - Reach existing patients with targeted emails.
- **Website and Social Media**
  - Promote services online and engage with your audience.
- **Organic Growth**
  - Build through word-of-mouth and patient referrals.
- **Community Engagement**
  - Participate in local health events to raise awareness.



# Reimbursement Rates

- Reimbursement is the **#1 barrier**
- Programs will vary by state.
  - Arkansas had a private grant and AR BCBS on board.
- Cash pay is always an option.
  - Consider your location and patient population.
  - ~\$75 is standard.



# References

- *Policies*. Birth Control Pharmacist. (2024, June 18). <https://birthcontrolpharmacist.com/resources/policies/>
- Rice, C., & Thompson, J. (n.d.). Selecting and monitoring hormonal contraceptives: an overview of available products. *US Pharmacist*. Retrieved August 29, 2024, from <https://www.uspharmacist.com/article/selecting-and-monitoring-hormonal-contraceptives-an-overview-of-available-products>.
- Centers for Disease Control and Prevention. (2024, May 15). *Unintended pregnancy*. Centers for Disease Control and Prevention. <https://www.cdc.gov/reproductive-health/hcp/unintended-pregnancy/index.html>
- Sonfield, A., Kost, K., Gold, R. B., & Finer, L. B. (2011). The public costs of births resulting from unintended pregnancies: National and state-level estimates. *Perspectives on Sexual and Reproductive Health*, 43(2), 94–102. <https://doi.org/10.1363/4309411>
- *Health Centers*. Health Centers | Beyond the Pill. (n.d.). <https://beyondthepill.ucsf.edu/health-centers>

Questions?





# Contact Information

## **Brittany Sanders, PharmD**

Owner, The Pharmacy at Wellington

## **Jenny Wells, PharmD**

Pharmacist-In-Charge, The Pharmacy  
at Wellington

[jenny@thepharmacyatwellington.com](mailto:jenny@thepharmacyatwellington.com)