Expanding Access to Reproductive Care

ISSUE
In 2021, the United States spent $4.3 trillion on healthcare, 18% of the national economy.¹ The government spends $21 billion on unintended pregnancies annually.² Creating programs to reduce unintended pregnancy rates is paramount; which would help achieve CDC’s Healthy People 2030 objectives in this area.³ Currently 1.9 million females in the United States live in “contraceptive deserts” or medically underserved areas.⁴ 52% of unplanned pregnancies are contributed to not using contraception.⁵ Thus, one way to reduce the unintended pregnancy rate is to expand access to reproductive care, specifically contraception.

POLICY SOLUTION
With nearly 90% of Americans living within five miles of a pharmacy,⁶ a nationwide policy to legalize all U.S. pharmacists to prescribe contraception is essential. Community pharmacists have proven themselves already as essential public health professionals during the COVID-19 pandemic, with responsibilities from testing and vaccinating to prescribing COVID-19 therapies.

Currently at least 24 states and the District of Columbia allow pharmacists to prescribe contraception in community pharmacies with a standing order, statewide mandate, or collaborative practice agreement.⁷ The early adopters have shown success with this valuable service, now to get all states on board. In Oregon, an early adopter state, pharmacists prescribing contraception were estimated to avert 51 unintended pregnancies and save the state $1.6 million in the first two years of this policy.⁸

Nationwide surveys show that 67% of women said they would benefit from accessing contraception directly from a pharmacist.⁹ This, coupled with the research showing bipartisan support of this policy¹⁰, further confirms the impact this expansion of contraception would have. Based on pharmacists’ expertise and access to all American citizens, we recommend the following policy to expand reproductive care to all people in the United States:

- After completing specialized training, licensed community pharmacists shall have prescriptive authority to prescribe pill, patch, ring, and injectable hormonal contraception medications to any person 16 years and older. This service and the contraception medication shall be reimbursed by public and private insurance companies.

This policy will decrease national debt by decreasing health care costs, and increasing women’s ability to get an education and gain high paying positions in the workforce. Each dollar of public funding on contraception saves $6 from decreasing unintended pregnancies.² For women with access to contraceptives, college enrollment is 20% higher, which results in higher incomes (8% more/hour) and decreased poverty.⁴ The cost of the service is only around $40,² definitely offset by the cost of an unintended pregnancy. Thus, if pharmacists can increase the number of women using contraception, the women and the United States win.