



March 30, 2020

Dear Chair Prusak, Co-Chairs Salinas and Hayden, and Members of the Committee,

On behalf of NARAL Pro-Choice Oregon, we would like to share our support for HB 2958, which will provide greater access to PrEP and PEP, as safe and effective medications in the prevention of HIV.

We support the work of the Public Health & Formulary Advisory Committee (PHFAC) that started the process of adopting policy recommendations to allow pharmacists in Oregon to prescribe PrEP and PEP. HB 2958 is a necessary step, as it will help ensure the policies are as effective as possible, and ensure Oregon is in alignment with national standards of care.

Medications like PEP and PrEP can prevent HIV infection altogether. Along with the development of life-saving antiretroviral drugs, ending HIV in Oregon is now a real possibility—but only for those who can afford the expense.

NARAL Pro-Choice Oregon can testify to the positive impact of pharmacy prescriptions, as it has increased access and utilization of hormonal contraceptives, thanks to legislation that passed with bipartisan support in the 2015 and 2017 sessions. We would love to see a similar impact for Oregonians who need access to PEP and PrEP.

Early research indicates the program has been incredibly successful in increasing access to hormonal contraceptives in Oregon. I'd like to share some results from the Pharmacists Expand Access to Reproductive Healthcare (or PEARL study), led by OSU professor and Medical Director of Oregon's Title X program, Maria I. Rodriguez, MD, MPH.

Her research found that the most successful implementation of the program was seen in populations with payers that covered the full cost of pharmacist consultations, like those who are on the Oregon Health Plan. From the results of the PEARL study:

“One year after passage of this legislation, 63% of ZIP codes across the state of Oregon now have a pharmacist certified to prescribe hormonal contraception.”¹

“Overall, 10% of new oral or transdermal hormonal contraceptive prescriptions were written by pharmacists. We found that, among Oregon's Medicaid enrollees, a majority (73.8%) of patients who received hormonal contraception from a pharmacist were new contraceptive users.”²

¹ Anderson L, Hartung D, Middleton L, Rodriguez MI. Pharmacist provision of hormonal contraception in the Oregon Medicaid Population. *Obstet Gynecol* 2019;133

Rodriguez MI, Biel FM, Swartz JJ, Anderson L, Edelman AB. Association of Pharmacist Prescription of Hormonal Contraception With Unintended Pregnancies and Medicaid Costs. *Obstet Gynecol*, 2019;133

² Ibid.

The research also shows that the successful results within the Medicaid population were due to several factors, with important lessons that could be applied to improve access among other populations:

“Oregon is unique in that Medicaid has reimbursed for pharmacist time and contraceptives since policy inception. Pharmacists have rapidly become certified to prescribe contraception in Oregon.”³

“Ensuring equitable reimbursement for services provided by pharmacists has been key to the uptake of the practice. Data from California, where Medicaid has not reimbursed for pharmacists’ counseling and time, demonstrates low availability of services when reimbursement is not assured.”⁴

Passage of HB 2958 will ensure that life-saving medications like PrEP and PEP are covered, and expanded, with access at more pharmacies. It will also improve upon previous policy, by ensuring pharmacists fees associated with patient consultations for prescribing medications like PrEP and PEP, *as well as oral contraceptives and other essential medications*, will be reimbursed by insurance companies.

We believe HB HB 2958 will eliminate barriers to care, expand reproductive freedom, and save lives. We respectfully ask for your support of this bill.

Thank you,

Christel Allen
Executive Director
NARAL Pro-Choice Oregon

³ Anderson L, Hartung D, Middleton L, Rodriguez MI. Pharmacist provision of hormonal contraception in the Oregon Medicaid Population. *Obstet Gynecol* 2019;133

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⁴ Ibid.