

SENATE HEALTH, HUMAN SERVICES AND SENIOR
CITIZENS COMMITTEE

STATEMENT TO

SENATE COMMITTEE SUBSTITUTE FOR
SENATE, Nos. 1073 and 2060

STATE OF NEW JERSEY

DATED: MAY 2, 2016

The Senate Health, Human Services and Senior Citizens Committee reports favorably a committee substitute combining Senate Nos. 1073 and 2060.

The combined substitute would permit pharmacists to furnish self-administered hormonal contraceptives to patients without an individual prescription, pursuant to procedures and protocols that are to be jointly adopted, pursuant to the “Administrative Procedure Act,” by the Board of Pharmacy (board) and the State Board of Medical Examiners (BME), in consultation with the American Congress of Obstetricians and Gynecologists, the New Jersey Pharmacists Association, and other appropriate entities. Self-administered hormonal contraceptives are defined to mean any oral, transdermal, or vaginal contraceptive product, including, but not limited to, birth control pills, vaginal rings, and diaphragms.

The substitute requires the procedures and protocols established by the board and BME to: (1) provide for the issuance of a standing order authorizing pharmacists in this State to furnish self-administered hormonal contraceptives to patients without an individual prescription; (2) identify the self-administered hormonal contraceptives that a pharmacist will be authorized to furnish to patients pursuant to the standing order; (3) require a pharmacist to make clinical decisions that are free from any financial influence imposed by insurance providers, contraceptive product manufacturers, and other parties having a financial interest in the disbursement or non-disbursement of self-administered hormonal contraceptives; (4) require a patient, prior to obtaining a self-administered hormonal contraceptive, to use a self-screening tool that will identify patient risk factors for the use of self-administered hormonal contraceptives, based on the current United States Medical Eligibility Criteria for Contraceptive Use (US MEC) developed by the federal Centers for Disease Control and Prevention; (5) require a pharmacist to offer to provide counseling to a patient about other forms of contraception that have been approved by the federal Food and Drug Administration, and, if the patient accepts the offer for counseling, require the pharmacist to provide the patient with

specific and appropriate information about such other forms of contraception, based on the results of the self-screening tool; and (6) require a pharmacist, upon furnishing a self-administered hormonal contraceptive to a patient, or upon determining that a self-administered hormonal contraceptive is not recommended, to refer the patient to the patient's primary care provider, or, if the patient does not have a primary care provider, to an appropriate and nearby medical clinic.

The board and the BME would both be authorized to ensure compliance with these provisions, and each board, moreover, would be specifically charged with the enforcement of these procedures and protocols, as applied to the board's respective licensees.

The substitute would also amend various health insurance statutes to clarify that, in addition to providing coverage for prescription female contraception that is purchased pursuant to an individual prescription issued by a health care professional, health insurance carriers that provide benefits for prescription female contraceptives will also be required to provide coverage for self-administered hormonal contraceptives that are purchased pursuant to a standing order issued in accordance with procedures and protocols established by the board and BME pursuant to the substitute bill's provisions. These clarifying amendments apply to hospital, medical, and health service corporations, commercial, individual, small employer and group health insurers, health maintenance organizations, prepaid prescription organizations, and the State Health Benefits Program.

The substitute would specify that nothing in its provisions may be deemed to expand the authority of a pharmacist to prescribe prescription medications.