

Managed Care Operations Memorandum
General Operations
MCOPS Memo # 02/2020-002

Date: February 21, 2020

Subject: Contraception Dispensing

To: Physical Health HealthChoices Managed Care Organizations (PH-MCOs) – Statewide

From: Laurie Rock, Director, Bureau of Managed Care Operations, Office of Medical Assistance Programs

Purpose:

To clarify that PH-MCOs may allow providers to dispense more than a one-month supply of oral contraceptives, including a 12-month supply, and to advise PH-MCOs that they should assist prescribers to provide women information on all family planning options.

Background:

A 2018 survey of the PH-MCOs found that six (6) PH-MCOs permitted up to a one-month supply of oral contraception to be dispensed and two (2) PH-MCOs permitted up to three months' supply to be dispensed.

To be most effective at preventing pregnancy, oral contraceptives require adherence to daily use, timely medication refills, and prescription renewals. Research from the University of Pittsburgh and the U.S. Department of Veterans Affairs shows that 43% of women receiving three-month increments of birth control pills experienced a gap between refills over the course of a year of use¹. According to a 2011 published study², California Medicaid enrollees who received a 12-month supply at their first contraceptive visit had less than half the pregnancy and abortion rates in the subsequent 12 months, as women who received a one- or three-month supply.

¹.Judge-Golden, Colleen P ;Smith, Kenneth J.,MD,MS; .Mor, Maria K.; Borrero, Sonya, MD. (2019). "Financial Implications of 12-Month Dispensing of Oral Contraceptive Pills in the Veterans Affairs Health Care System." JAMA Internal Medicine., vol. 179 (9).

² Foster, Diana Green, Hulett, Denis, Bradsberry, Mary, Darney, Phillip, Policar, Michael. (2011). "Number of Oral Contraceptive Pill Packages Dispensed and Subsequent Unintended Pregnancies." Obstetrics and gynecology., vol. 117.

A study by the University of Pittsburgh, conducted for the Department of Human Services, estimated the cost implications of 12-month oral contraceptive pills dispensing compared to a one-month or three-month oral contraception pill dispensing. The study found that 12-month oral contraception pill dispensing would result in a cost savings of \$151 per person annually and would result in 49 unintended pregnancies averted per 1,000 women.³

State regulation, 55 Pa. Code Section 1121.53(c), outlines the requirements in the Medical Assistance Fee-for-Service program related to prescriptions:

"Payment for prescriptions is limited to quantities consistent with the medical needs of the patient not to exceed a 34-day supply or 100 units, whichever is greater. Prescriptions may be refilled as long as the total authorization does not exceed a 6 months' or five refill supply, whichever comes first, from the time of original filling of the prescription."

The HealthChoices Physical Health Agreement, Exhibit A, however, excludes the PH-MCOs from complying with 55 Pa. Code Section 1121.53(c), giving PH-MCOs the ability to provide payment for up to 12-month supplies of oral contraceptives.

Discussion:

The PH-MCOs should ensure that there are no barriers for the Medical Assistance population receiving oral contraception. Permitting providers to dispense greater than a one-month supply of oral contraceptives, such as 12-month supplies, aligns with recent studies that suggest increased access to contraception results in less gaps between refills and less unintended pregnancies. The PH-MCOs are strongly encouraged to consider allowance for greater quantities of oral contraceptives, including 12-month supplies, to be dispensed to increase access to MA beneficiaries.

The PH-MCOs should also make information available to their network providers that provide family planning services about all available MA covered family planning options, including long acting reversible contraception (LARC).

Next Steps:

The PH-MCOs are encouraged to amend their policies regarding dispensing contraception to allow a greater than a one-month supply to be dispensed. Additionally, the PH-MCOs should make information available to network providers that encourage prescribers of

³ Jarlenski, Marian; Tomko, Heather; Roberts, Mark S.' Judge-Golden, Collen; Borrero, Sonya; O'Connor, Jason. (2019). "12-Month Dispensing of Oral Contraceptive Pills: Cost-Effectiveness Analysis." Final Report prepared by the University of Pittsburgh Health Policy Institute.

contraceptives to provide information about all family planning options available to women. PH-MCOs are encouraged to make available materials to prescribing providers to distribute to MA beneficiaries on all family planning options.

Obsolete:

N/A

Attachment:

N/A