CONTRACEPTIVE ACCESS IN UTAH DURING COVID-19

PREPARED BY
Family Planning Elevated

801-839-5356 (text or call) | www.fpeutah.org
The current coronavirus pandemic is creating a challenging environment for health systems across the country. As clinics and providers prepare to support those infected with the virus, they are being forced to make tough decisions around patient care. As part of this process, many clinics are postponing, rescheduling, or canceling all non-essential health services to ensure there is enough time, space, equipment, and staffing to meet anticipated urgent care needs.

At Family Planning Elevated, we are committed to doing our best to support all health systems as they brace for the impact of this disease on our communities in Utah. We believe that ensuring people in the state continue to have access to contraception is one of the most important ways we can best support the health system and our communities, both now and in the long-term. As many families and individuals are facing job loss, wage cuts, and economic strain, now is a particularly important time to ensure that all people have the resources they need to prevent unwanted pregnancies.
The following are guidelines and best practices related to providing contraceptive services to clients during the COVID-19 pandemic:

1. Consider prioritizing telehealth/phone call prescriptions for patients who need ulipristal acetate. Ulipristal acetate, or “Ella,” is a more effective method of oral emergency contraception than levonorgestrel (Plan B). It can be used up to 120 hours (5 days) after unprotected sex and is more effective at preventing pregnancy than levonorgestrel EC among patients with higher BMI. Unfortunately, unlike the levonorgestrel emergency contraception pill which is available over the counter, Ella must be prescribed. By prioritizing provision of prescriptions for ulipristal acetate, your clinic can provide effective support for people in emergency situations.

   1A. Consider providing a prescription for ulipristal acetate to anyone who receives any contraceptive services throughout the pandemic. In the event that their access is restricted at a later date, this prescription could provide auxiliary support.

   1B. If your clinic has a pharmacy or clinic-dispensing privileges, ensure it is stocked with ulipristal acetate. Ella can be ordered through many of the leading distributors, through group purchasing organizations, or directly from the website: [https://ellanow.com/hcp/](https://ellanow.com/hcp/)

2. Increase continuity of care for pill/patch/ring users by distributing prescriptions for 13 cycles of contraception (or 18 cycles for continuous use), regardless of new or established patient status. Increased prescription length reduces clinic patient load in the short-term and ensures continued contraception support for people who may experience economic fluctuation.

   2A. Dispense the maximum number of contraceptive pills/patches/ring cycles allowable at one time, based on patient preference. For clinics with in-house pharmacies, dispensing privileges, or for pharmacies - consider providing the full prescription at the service date, to reduce need for future visits and increase ongoing access for people who may experience subsequent economic fluctuation. Maximum number of cycles dispensed may vary by patient insurance status or by clinic/pharmacy capacity.
3. Consider prioritizing removal of long-acting contraceptive (LARC) methods, such as IUDs and implants. While it may not be possible to incorporate removal of methods into a daily clinic routine, ensuring individuals can have their IUDs and implants removed is important to maintaining reproductive autonomy and fostering patient trust in the health system. Offering a stacked LARC day (or half-day) once per month at the clinic, or identifying clinics offering LARC insertion and removal and referring clients, are ways to support clients with removal needs during this time.

3A. Consider continued offering of/referral for LARC insertion, including copper IUD for emergency contraception. Long-acting contraception is important to many patients, particularly those whose health coverage is in jeopardy or people in emergency scenarios. Provision of these methods or referral to providers who continue to offer LARC services, even in a limited capacity, is of continued importance.

4. Consider offering a stacked Depo day (or half-day) once per month to support clients who need continued injectable contraception or providing preemptive referral for clients to clinics who continue to provide these services. Stacked service days for injectable contraception may also be a way to ensure people have continuity of care without requiring daily services.
ADDITIONAL RESOURCES FOR CONTRACEPTIVE ACCESS IN UTAH

- **Contact Family Planning Elevated directly** *(hello@fpeutah.org)*. We will support in coordinating referrals and care for people struggling to access contraception. We also support clinics, pharmacies, and community organizations interested in supporting contraceptive access and would be happy to work with you.

- **Pharmacy access for pills/patches/rings.** As of 2019, pharmacists in Utah are allowed to dispense contraceptive pills/patches/rings to clients under a standing order from the State Health Department. While this does increase the availability of contraception, it is not currently covered by insurance and the costs to clients can be prohibitive. Nevertheless, this is a resource for people, particularly new patients who might need contraception. FPE can assist pharmacies interested in registering to provide these services. Learn more at [https://mihp.utah.gov/birthcontrol](https://mihp.utah.gov/birthcontrol)

- **Onsite dispensing for clinics:** In November 2019, the Utah Board of Pharmacy changed dispensing rules to allow prepackaged contraceptive drugs to be provided directly by licensed clinics. This can reduce patient burden in obtaining some methods. Clinics interested in participating must complete an application to be considered for dispensing licensure. To learn more, please contact us directly *(hello@fpeutah.org)*.

- **Telehealth/mail-order contraception.** Several organizations provide telehealth/mail-order contraceptive pills and emergency contraception. While these options might be cost-prohibitive for some clients, and not all methods are available, they are nevertheless an important option for some individuals experiencing access barriers. Mail-order contraceptive organizations and an overview of costs and available methods are summarized on Bedsider: [https://www.bedsider.org/features/851-how-to-get-birth-control-delivered-right-to-your-door](https://www.bedsider.org/features/851-how-to-get-birth-control-delivered-right-to-your-door)

We deeply appreciate the enormous effort by clinics and providers to support their communities during this difficult time. We believe in you. We are here for you. We will do everything we can to support you so that you can do what you do best.
REFERENCES


