

Contraception on Demand (COD) Demonstration Project

VA Pittsburgh Healthcare System and VA Puget Sound Health Care System

July 2021 – January 2022



Background: Given the growing numbers of women Veterans of reproductive age using VA, building capacity to provide high quality, accessible contraceptive services is a key objective for Office of Women's Health.

Pharmacist prescribing and 12-month dispensing are two promising strategies to expand access to contraception.

Program Summary: Primary care clinical pharmacists were trained to conduct patient-centered contraceptive counseling and prescribe hormonal contraception using a shared-decision model, and local approval to dispense 12-month supplies was secured. Veterans could access the program via direct calls, provider referrals, or pharmacy outreach. Pharmacists provided contraceptive counseling via scheduled telephone consults. They prescribed all short-acting methods and provided counseling and referrals for long-acting reversible contraception (LARC). Veterans seeking a new prescription were offered a 3-month supply and scheduled for a follow-up; Veterans seeking a refill of an existing prescription were offered a 12-month supply.

Key Outcomes

Pharmacist-led counseling, prescribing and care coordination:

- Pharmacists **completed 74 consults** during the study timeframe:
 - 57 Veterans were prescribed hormonal contraception (17 new prescriptions, 40 refills)
 - 6 Veterans referred for LARC placement
- **In 9 cases, pharmacists identified contraindications to a Veteran's *current* method**, resulting in method switching, behavior change and/or referral to primary care for safety assessment

12-month dispensing:

- Among the 40 Veterans eligible for 12-month dispensing, **90% opted to receive a 12-month supply**
- Among Veterans who were eligible for 12-month dispensing and had a prescription co-pay, **an equally high proportion (89%) opted for a 12-month supply** at one time

Implementation barriers and facilitators:

- Very few Veterans called in to the service at either site, despite outreach and marketing efforts
- PCPs in Puget Sound were more likely to refer to patients than in Pittsburgh
- Pittsburgh outreached to Veterans who needed refills; Puget Sound lacked resources to do this
- Engaging champions to address site-specific barriers is essential to successful implementation

Qualitative Interview responses

*"[The pharmacist] asked me very **in-depth questions that I usually don't get asked for birth control** ... this was much better [than previous experiences getting contraception at VA] because I usually have to squeeze in my birth control request, and we don't talk about it all that much."*
– Veteran participant

*"[I opted for 12 months] so I wouldn't have to worry about receiving the next birth control pack in time. I always have to call for my meds but **not having to worry about that is a relief.**"*
– Veteran participant

*"It was a really good learning opportunity for us to be able to expand the services we can provide and **helped us become better, more well-rounded pharmacists.**"*
– COD Pharmacist

Conclusions:

- Pharmacist-led contraceptive counseling and prescribing is safe and acceptable to Veterans.
- Veterans who participated in the program were interested in a 12-month supply when offered, regardless of whether they were subject to a copay.