



REPRODUCTIVE RIGHTS & HEALTH PHARMACY RULES 101

Prescription Contraception is Basic Health Care for Women

- Family planning is central to good health care for women. Access to contraception is critical to preventing unintended pregnancies and to enabling women to control the timing and spacing of their pregnancies. Contraceptive use in the United States is virtually universal among women of reproductive age. A woman who wants only two children must use contraception for roughly three decades of her life. Also, women rely on prescription contraceptives for a range of medical purposes in addition to birth control, such as regulation of cycles and endometriosis.
- Emergency contraception (EC), also known as the morning after pill, is an FDA-approved form of contraception that prevents pregnancy after sexual intercourse. EC is a timesensitive medication that has great potential to prevent unintended pregnancies. Currently, there are three types of emergency contraception available: a prescription drug, an over-the-counter drug, and a copper intrauterine device (IUD) inserted by a health care provider.

Refusal to Dispense Contraception are Increasing

Reports of pharmacies refusing to fill prescriptions for birth control or medications related to birth control or provide EC have surfaced in at least twenty-six states across the nation, including: AZ, CA, DC, GA, IL, LA, MA, MI, MN, MO, MT, NH, NJ, NM, NY, NC, OH, OK, OR, RI, TN, TX, VA, WA, WV, WI.

These refusals to dispense contraceptives or provide EC are based on personal beliefs, not on legitimate medical or professional concerns. The same pharmacies that refuse to dispense contraceptives because of personal beliefs often refuse to transfer a woman's prescription or refer her to another pharmacy. These refusals can have devastating consequences for women's health.

Despite the fact that one type of EC is available without a prescription, refusals based on personal beliefs are still a problem. Some stores continue to keep non-prescription EC behind the counter or in locked cases, so individuals seeking it must interact with pharmacists or other pharmacy staff who may have personal beliefs against providing the drug.

Some examples of refusals in the pharmacy:

- o August 2016: In Albuquerque, New Mexico, a 13-year-old girl was prescribed an IUD to treat menstrual complications when no other form of birth control worked for her body. Before the insertion, she was prescribed the hormone misoprostol to make the IUD insertion easier. But when her mom went to fill her prescription at Walgreens, the pharmacist refused to fill the misoprostol because of his "personal beliefs," telling her to try another Walgreens.
- o April 2012: Andrew Andrade attempted to purchase EC at a Jersey City, New Jersey Rite Aid for his girlfriend who was at work but he was turned away, even though the FDA rules allow men to buy EC.
- o November 2010: Adam Drake attempted to purchase non-prescription EC at a Walgreens in Houston, Texas and was turned away, despite the fact that he should have been allowed to purchase the medication.
- o March 2010: A pharmacy that refused to stock or dispense contraceptives in Chantilly, Virginia closed due to lack of business. When it opened in October 2008, staff at the pharmacy refused to provide referrals or help individuals find contraception elsewhere.
- o January 2010: A mother of two in Montclair, California went to her local CVS to purchase EC after she and her fiancé experienced a birth control failure. The pharmacist refused to dispense EC to her, even though it was in stock, and told her to "come back in two and a half days," at which point it would no longer be effective.



- o May 2007: In Great Falls, Montana, a 49-year-old woman who used birth control to treat a medical condition went to her local pharmacy to fill her latest prescription. She was given a slip of paper informing her that the pharmacy would no longer fill any prescriptions for birth control. When she called back to inquire about the policy change, the owner of the pharmacy told her that birth control was “dangerous” for women.
- o January 2007: In Columbus, Ohio, a 23-year-old mother went to her local Wal-Mart for EC. The pharmacist on staff “shook his head and laughed.” She was told that even though the store stocked EC, no one on staff would sell it to her. She had to drive 45 miles to find another pharmacy that would provide her with EC.
- o December 2006: In Seattle, Washington, a 25-year-old woman went to her local RiteAid to get non-prescription EC after she and her fiancé experienced a birth control failure. The pharmacist told her that although EC was in stock, he would not give it to her because he thought it was wrong. The woman had to repeatedly insist that the pharmacist find her another pharmacy in the area that would provide her with EC.
- o January 2006: In Northern California, a married mother of a newborn baby experienced a birth control failure with her husband. Her physician called in a prescription for EC to her regular pharmacy, but when she went to pick it up, the pharmacist on duty not only refused to dispense the drug, which was in stock, but also refused to enter the prescription into the pharmacy’s computer so that it could be transferred elsewhere.
- o January 2005: In Milwaukee, Wisconsin, a mother of six went to her local Walgreens with a prescription for emergency contraception. The pharmacist refused to fill the prescription and berated the mother in the pharmacy’s crowded waiting area, shouting “You’re a murderer! I will not help you kill this baby. I will not have the blood on my hands.” The mother left the pharmacy mortified and never had her prescription filled. She subsequently became pregnant and had an abortion.
- o April 2004: In North Richland Hills, Texas, a 32-year-old mother of two went to her local CVS for her regular birth control prescription refill. The pharmacist refused to refill her prescription because of his personal beliefs. The pharmacist said he would not fill the prescription because oral contraceptives are “not right” and “cause cancer.”
- o January 2004: In Denton, Texas, a rape survivor seeking EC was turned away from an Eckerd pharmacy by three pharmacists, who refused to fill the time-sensitive prescription due to their religious beliefs. The pharmacists’ refusal put the survivor in danger of becoming pregnant due to the rape.

The Legal Landscape: What Governs the Practice of Pharmacy?

- The laws governing pharmacies vary from state to state. Pharmacies must abide by state laws and regulations, which are written by the state legislature and the state Pharmacy Board.
- The laws and regulations in most states do not specifically speak to the issue of pharmacy refusals based on personal beliefs. States that provide general guidance about when pharmacies or pharmacists may refuse to dispense tend to limit the reasons for such a refusal to professional or medical considerations—such as potentially harmful contraindication, interactions with other drugs, improper dosage, and suspected drug abuse or misuse—as opposed to personal judgments.
- Many pharmacist associations that have considered this issue, including the American Pharmacists Association, have issued policies requiring that patient access to legally prescribed medications is not compromised—for example by either filling valid prescriptions or transferring them to another pharmacist who can. Although such policies are not legally binding, they encourage pharmacies to meet consumers’ needs.

Legislative and Administrative Responses to Refusals in the Pharmacy

Fewer than half of the states in the country explicitly address the issue of refusals to provide medication to patients in the pharmacy.

PROHIBITING OR LIMITING REFUSALS

Existing State Laws and Policies:

- o Eight states—CA, IL, ME, MA, NV, NJ, WA, WI—explicitly require pharmacists or pharmacies to provide medication to patients.
- o In seven states—AL, DE, NY, NC, OR, PA, TX—pharmacy boards have issued policy statements that allow refusals but prohibit pharmacists from obstructing patient access to medication.

PERMITTING REFUSALS

- Existing State Laws and Policies: Six states—AZ, AR, GA, ID, MS, and SD—have laws or regulations that specifically allow pharmacies or pharmacists to refuse for religious or moral reasons without critical protections for patients, such as requirements to refer or transfer prescriptions.

Public Opinion

According to surveys, the public is overwhelmingly opposed to allowing refusals in the pharmacy that prevent women from obtaining contraception.



- o A national survey of Republicans and Independent voters conducted in September and October 2008 on behalf of the National Women’s Law Center and the YWCA found that 51% strongly favor legislation that requires pharmacies to ensure that patients get contraception at their pharmacy of choice, even if a particular pharmacist has a moral objection to contraceptives and refuses to provide it. That includes 42% of Republicans and 62% of Independents.
- o In a national opinion survey released in July 2007, which was conducted for the National Women’s Law Center and Planned Parenthood Federation of America by Peter D. Hart Research Associates, 71% of voters said that pharmacists should not be allowed to refuse to fill prescriptions on moral or religious grounds, including majorities of every voter demographic such as Republicans (56%), Catholics (73%), and evangelical Christians (53%). Even more respondents (73% overall) supported requiring pharmacies to dispense contraception to patients without discrimination or delay.
- o A poll conducted in May 2007 by Lake Research Partners found that 82% of adults and registered voters believed that “pharmacies should be required to dispense birth control to patients without discrimination or delay.”

How to Respond to a Refusal in the Pharmacy

- File a complaint with your state’s pharmacy board to get sanctions against the pharmacist or pharmacy..
- Communicate your story to the press.
- Ask the state pharmacy board or legislature to put in place policies that will ensure every consumer’s right to access legal pharmaceuticals.
- Alert the pharmacy’s corporate headquarters; many of the major pharmacy chains have policies that protect women’s right to receive contraception in store, without discrimination or delay.
- Get EC today, before you need it!

If you have had trouble getting your prescription for EC or birth control pills filled or getting nonprescription EC, please contact the National Women’s Law Center at 1-866-745-5487 or coverher@nwlc.org.

