Maryland OTC BC Collaborative meeting

November 5, 2025, 12:00 PM EST

Attendance

Collaborative Members (and representatives):

- Delia Angulo Chen
- Sabrina Bassett
- Cynthia Baur
- Aliyah Horton
- Penny Jacobs
- Jakeya Johnson
- Becca Lane
- Cailey Locklair
- Neil McGarvey
- Victoria Nichols
- Christina Piecora
- Samantha RItter
- Joe Winn
- Joy Baldwin
- Camille Fesche
- Philemon Kendzierski
- Amanda Li

Commissioners:

- LaShaune Stitt
- Christine Lee

Guests:

- Robyn Elliot

Commission Staff:

- Ariana Kelly
- Brett Jordan
- Genesis Franco
- Camille Fabiyi

Summary

Co-Chairs Cynthia Baur and Aliyah Horton welcomed participants to the meeting. Aliyah Horton clarified that there are no age restrictions on Plan B or other over-the-counter birth control products, a point supported by Victoria Nichols and Samantha Ritter. The collaborative approved Draft Recommendation 1 (included below) regarding consistent billing for OTC contraceptives, as written. Discussion of Draft Recommendation 2 (included below) led to the decision to amend it with subrecommendations focusing on specific priority populations, including young people, pharmacists, and communities facing systemic barriers. The meeting finished with a reminder of the upcoming opportunity to review sections of the interim report, as well as a preview of the Collaborative's planned work in 2026.

Details

- **Welcome and Overview of the Meeting** Co-Chair Cynthia Baur opened the second meeting of the over-the-counter birth control collaborative, with Co-Chair Aliyah Horton joining her in the welcome. The agenda included clarifying a point on age restrictions, discussing draft recommendations for the interim report, and concluding with questions and wrap-up.
- **Clarification on Age Restrictions for Over-the-Counter Contraceptives** Aliyah Horton provided clarification that there are no age restrictions on access to Plan B, as the previous restriction is no longer in place, and over-the-counter (OTC) birth control in general is approved for full access with no age restrictions. Victoria Nichols added context, noting that age restrictions create barriers for young people and those without ID, and that Opill was approved without an age restriction due to evidence supporting adolescent access to contraception. Samantha Ritter supported this by noting that Maryland has strong minor consent laws and a well-established precedent to expand access as broadly as possible.
- **Draft Recommendation 1: Consistent Billing Method for OTC Contraceptives**
    - Draft text: "State agencies, including the Maryland Insurance Administration, Department of Health, Medicaid Program, and State Employee Health Program, should advance guidance to pharmacies, pharmacy benefit managers, and health plans regarding a consistent billing method for insurance coverage of OTC contraceptive products."

    - Aliyah Horton introduced the first draft recommendation, stemming from the pharmacy community, which proposes that state agencies should advance guidance to stakeholders regarding a consistent billing method for insurance coverage of OTC contraceptive products. This recommendation is intended to ensure consistency in the billing process across the board for full access, and the agencies would be asked to support stakeholder education on implementing the practice. Victoria Nichols agreed with the recommendation, noting that pharmacists need clear guidance for claim processing and mentioned that CVS Caremark has issued a bulletin with a billing protocol recommending the use of the pharmacy's NPI number.

- **Discussion and Approval of Recommendation 1** Samantha Ritter supported the recommendation but suggested clarifying the specific responsibilities of state agencies in the final report, while Becca Lane also expressed support, viewing it as a necessary step for implementing existing coverage requirements. Joy Baldwin shared that there are slight administrative and billing differences between Medicaid fee-for-service and MCOs but committed to working to keep the two branches cohesiveThe collaborative voted, with 10 votes to approve the billing guidance as finalized for the interim report, deferring more detailed work on agency roles for the next year.
- **Draft Recommendation 2: Informing and Educating Marylanders on OTC Birth Control**
    - Draft text: “The state should inform and educate Marylanders about OTC birth control access by activating all relevant existing partnerships and seeking out new partnerships within and outside of state government.”
    - Cynthia Baur presented the second draft recommendation, focusing on the state informing and educating Marylanders about OTC birth control access by utilizing existing and seeking new partnerships within and outside state government. The intent is to emphasize consumer/public education and leverage partnerships for this purpose. Delia Angulo Chen expressed strong support, noting a current lack of public knowledge about Opill, especially among young people on college campuses.
- **Refining Recommendation 2 for Specific Target Audiences** Christina Piecora emphasized the importance of educational efforts meeting people where they are, particularly young folks and underserved communities, and ensuring accessibility and clarity in communication. Victoria Nichols sought clarification on whether the recommendation targeted general consumers, or also included

educating stakeholders like pharmacists and retailers. Brett Jordan clarified that the collaborative could choose to either add specific populations as subrecommendations or as context within the report, suggesting that "Marylanders" can be broadly defined with the understanding that priority populations are included.

- **Decision on Structure of Recommendation 2 and Identification of Priority Groups** After discussion about the preference for subrecommendations or context, and considering clarity and avoiding long lists, Aliyah Horton suggested focusing on three broad categories: the state, providers, and the public. A poll was conducted, and the Collaborative voted with seven votes to amend the recommendation by adding specific populations as subrecommendations, with five votes for including them as context. Priority populations identified for these subrecommendations included young people/young adults, pharmacists, other healthcare providers, insurers, PBMs, and communities facing systemic barriers to contraception.
- **Timeline for Interim Report Review and Future Work** Brett Jordan reminded members that the review window for the draft interim report, specifically the recommendation and meetings sections, is December 8th through 15th, ahead of the January 1st deadline to the legislature. Looking ahead to 2026, the collaborative's work will involve reviewing federal comments and proposed regulations, analyzing the "Free the Pill" report, examining the feasibility of point-of-sale coverage, and engaging in deeper public and stakeholder education efforts. The final report will also address public health programs for consumers not covered by the Contraceptive Equity Act.
- **The meeting adjourned at 12:45 pm EST.**

Next steps

- [ ] Cynthia E Baur, Aliyah Horton, and Brett Jordan -DHS- will draft a revised version of Recommendation 2 to include sub-recommendations for specific populations, which the collaborative will review as part of the draft report.