

OTC Collaborative: January Meeting

January 7, 2026, 11am EST

Attendance:

Collaborative members:

- Sabrina Bassett
- Sarah Case-Herron
- Kelly Cleland
- Penny Jacobs
- Jakeya Johnson
- Becca Lane
- Amanda Li
- Cailey Locklair
- Neil McGarvey
- Victoria Nichols
- Christina Piecora
- Samantha Ritter

Guests:

Robyn Elliott

MCW Staff:

Brett Jordan

Genesis Franco

Camille Fabiyi

Taryn Graves

Summary

Cynthia E Baur and Aliyah Horton welcomed attendees to the 2026 collaborative year, with Brett Jordan -DHS- outlining the schedule, including a presentation from Victoria Nichols and Robyn Elliott of the Free the Pill collaborative on recommendations for improving over-the-counter (OTC) contraception access. The presentation focused on

the core principles for implementing OTC coverage, key access points, and the need for uniform billing requirements across all insurance plans, especially addressing the prescriber ID issue for OTC products. Additionally, the group discussed strategies for increasing consumer awareness of OTC coverage, including in-store signage and the importance of covering all brands, allowing extended dispensing of up to 12 months, and implementing retail counter coverage for OTC contraceptives.

Details

- **Meeting Kick-off and Welcome** Cynthia E Baur and Aliyah Horton welcomed everyone to 2026, marking the start of a new year of activities for the collaborative. Aliyah Horton thanked contributors for submitting the 2025 report on time and noted that the first big meeting of 2026 would be a briefing with no decisions required.
- **Interim Report and Proposed Meeting Topics** Brett Jordan -DHS- provided a quick overview of the agenda, which included discussing the interim report and proposed meeting topics for 2026. She confirmed that the interim report was submitted on time, and mentioned a potential General Assembly briefing on the issue sometime in the next couple of weeks. Brett then outlined the proposed flow for the year, including a presentation from Free the Pill for developing final report recommendations.
- **2026 Collaborative Meeting Schedule** The schedule includes a presentation from Free the Pill today, discussion on federal comments and potential recommendations related to OTC products on March 2nd, and a May meeting focusing on retail counter coverage. Future topics also include public health programs and public education campaigns in July, approval of recommendations in September, and final report approval in November. Brett Jordan encouraged attendees to reach out with any questions or suggested changes.
- **Introduction to Free the Pill** Victoria Nichols, Senior Project Director for Free the Pill, introduced the project as a coalition-driven effort of Ibis Reproductive Health working for over two decades to bring birth control pills over the counter in the US. The coalition, which includes over 275 members, initially focused on building the evidence base to support the move to OTC. Victoria Nichols stated the vision for access is birth control pills being OTC, fully covered by insurance without a prescription, priced affordably, and truly accessible to all people.

- Over-the-Counter Contraception Access and Opill** Victoria Nichols emphasized that Opill's approval in 2023 was a movement-driven win, and they advocate for Opill and all OTC birth control pills to be fully stocked, available without barriers like lock boxes, fully covered by insurance without a prescription, and without financial barriers. She highlighted that Maryland was the first of the now 11 states that have passed laws regarding OTC contraception coverage. Robyn Elliott clarified that Maryland's law, passed in 2016, did not include coverage for OTC devices like condoms due to lack of familiarity at the time, although Maryland's Medicaid program does cover condoms.
- Free the Pill Collaborative and Guiding Principles** Victoria Nichols mentioned that Free the Pill established an OTC contraceptive coverage implementation collaborative in 2023 to research best practices and support states in adopting and implementing OTC coverage. Robyn Elliott noted that this collaborative's work led to the report "Free the Pill and Cover It Too," which provides guidance for implementation. The report emphasizes four core principles for implementing OTC coverage: meeting people where they are, prioritizing marginalized communities, ensuring affordability, and having "no wrong door" to access.
- Access Points for OTC Birth Control** Robyn Elliott identified two primary access points for OTC birth control: the retail counter (physical, virtual, or vending machine) and the pharmacy counter. She noted that the Maryland Collaborative is heavily focused on the pharmacy counter, as this is currently the mechanism for insurance coverage of OTC products within the state.
- Uniform Billing Requirements and Prescriber ID Issue** The number one recommendation from Free the Pill for improving pharmacy counter access is the adoption of uniform billing requirements across all insurance plans. Robyn Elliott detailed the issue with standardized pharmacy claims forms requiring a prescriber ID number (NPI) even for OTC products, causing confusion for pharmacists. The industry standard, set by CVS Caremark, is to enter the pharmacy NPI number in the prescriber field. Robyn Elliott also suggested two potential federal actions: establishing a specific NPI for any OTC product or modifying claims forms to indicate an OTC product.
- Discussion on MIA's Role in Billing Guidance** Sabrina Bassett raised questions from their leadership regarding MIA's position on billing uniformity. Brett Jordan clarified that the collaborative's interim report recommended all state agencies involved with health insurance encourage a consistent approach to billing.

- Increasing Consumer Awareness of OTC Coverage** The Free the Pill collaborative recommended that states integrate awareness about OTC contraception and coverage into existing education campaigns and that payers provide clear communication to consumers about what is covered. A highly recommended strategy is placing signs in the retail aisle to inform consumers that the product may be covered, prompting them to check with the pharmacist. Victoria Nichols and Robyn Elliott agreed to share studies on access barriers, but noted that awareness of coverage remains low, particularly because Maryland's law only covers about one-third of the population.
- Awareness Gaps and Social Media** Brett Jordan shared that youth representatives reported that many college students do not know what Opill is and confuse it with emergency contraception, indicating an awareness gap regarding daily OTC options. Sabrina Bassett -MDInsurance- added that many Marylanders, especially Baltimoreans, are unaware of this availability and process, emphasizing that social media is a key communication channel for youth.
- Coverage of All Brands and Frequency Limits** Free the Pill recommended that insurance should cover the upfront cost of OTC birth control, including all brands and generics of OTC birth control, to prevent consumers from having to shop around. They also highlighted the importance of being thoughtful about frequency limits, especially for emergency contraception, to allow for advanced provision. For daily birth control pills like Opill, the recommendation is to allow for dispensing of up to 12 months at a time.
- Guidelines and Messaging in Stores** Kelly Cleland, Executive Director at the American Society for Emergency Contraception, supported the idea of not naming specific products in guidelines due to the constant emergence of generics, suggesting the use of the term "OTC contraception" broadly. She emphasized the importance of having a quick note or card on the retail shelf to provide clear instructions on how to get coverage, addressing consumers' discomfort with asking staff questions, particularly for emergency contraception.
- Retail Counter Coverage for Over-the-Counter Contraception** Robyn Elliott discussed the recommendation that OTC coverage should be processed at the retail counter, rather than exclusively at the pharmacy counter, due to issues like stigma associated with emergency contraception and pharmacists being too busy. They noted that industry comments on a federal request for information widely recognized the need to figure out the retail counter piece. Examples of

existing technology that supports this include Medicare Advantage OTC coverage cards, Medicare coverage for other OTC products, and the use of HSA and FSA cards for OTC birth control.

- **Access Technology and Stakeholder Collaboration** Robyn Elliott mentioned that advocates, particularly younger people, suggested that OTC coverage should be available through an app in addition to an OTC card. A second recommendation from the Free the Pill Collaborative observation was for all stakeholders to work together on this matter, as it makes sense for various reasons. Robyn Elliott also highlighted that one of the top recommendations in the Free the Pill and Cover Two report's checklist is for state agencies to support collaboration among stakeholders through convenings like the present meeting.
- **Recent Resources on OTC Contraceptive Coverage** Robyn Elliott shared two recent resources: an article published in the peer-reviewed journal *Contraception*, primarily authored by Victoria Nichols, which discusses concepts covered in the meeting, and an OTC coverage toolkit for state advocates published by Free the Pill and the National Health Law Program. Victoria Nichols later provided a physical example of a brochure used by CVS to advertise OTC benefits cards.
- **Challenges and Opportunities for OTC Coverage Implementation** Aliyah Horton brought up challenges related to signage in pharmacies, noting that signage and in-aisle information are often corporate decisions and not individual store decisions, often made based on regions for regional impact. Robyn Elliott confirmed that there has been a bump up in states interested in OTC coverage, especially following Opill's approval, and noted that several states near Maryland have passed coverage laws.
- **Future Meeting Focus** Brett Jordan thanked Robyn Elliott and Victoria Nichols for their presentation and announced that the next meeting would focus on responses to attempted federal policymaking, which will include an analysis of comments on a Request for Information and a proposed rule. Aliyah Horton expressed excitement about the future discussion on the federal level, an area they are less familiar with than state-level happenings. Cynthia E Baur noted that the meeting had surfaced concrete steps for recommendations and thanked everyone for attending.