

SENATE No. 2073

The Commonwealth of Massachusetts

SENATE, June 2, 2005.

The committee on Public Health, to whom was referred the petition (accompanied by bill, Senate, No. 1319) of Pamela P. Resor, Cynthia Stone Creem, Brian P. Lees, Susan C. Fargo and other members of the General Court for legislation to provide timely access to emergency contraception, and the petition (accompanied by bill, House, No. 1643) of Douglas W. Petersen and others relative to emergency contraception for victims of sexual assault or rape, reports the accompanying bill (Senate, No. 2073).

For the committee,

SUSAN C. FARGO.

The Commonwealth of Massachusetts

In the Year Two Thousand and Five.

AN ACT TO PROVIDE TIMELY ACCESS TO EMERGENCY CONTRACEPTION.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Section 97B of chapter 41 of the General Laws, as
2 appearing in the 2000 Official Edition, is hereby further amended
3 by inserting at the end of the second paragraph after line 23 the
4 following sentence:— Each kit shall include medically and factu-
5 ally accurate written information prepared by the commissioner of
6 public health about emergency contraception.

1 SECTION 2. Section 70E of chapter 111 of the General Laws, as
2 appearing in the 2000 Official Edition, is hereby further amended by
3 inserting after line 99 the following new paragraph:—

4 (o) to receive medically and factually accurate written informa-
5 tion prepared by the commissioner of public health about emergency
6 contraception; to be promptly offered emergency contraception; and
7 to be provided with emergency contraception upon request, if the
8 patient is a female rape victim of childbearing age.

1 SECTION 3. Section 70E of chapter 111 of the General Laws, as
2 appearing in the 2000 Official Edition, is hereby further amended by
3 inserting after line 161 the following new paragraph:—

4 Every patient who is a female rape victim, who is of child-
5 bearing age and who presents at a facility after a sexual assault
6 shall promptly be provided with medically and factually accurate
7 written information about emergency contraception prepared by
8 the commissioner of public health. A facility shall require all per-
9 sons who provide care to victims of sexual assault to be provided
10 with medically and factually accurate written information about
11 emergency contraception prepared by the commissioner. Facilities
12 that provide emergency care shall promptly offer emergency con-

13 traception at the facility to each female rape victim of child-
14 bearing age, and shall initiate emergency contraception upon her
15 request.

1 SECTION 4. Chapter 94C of the General Laws, as appearing in
2 the 2000 Official Edition, is hereby further amended by inserting
3 the following new section:—

4 Section 19A. As used in this section the following words shall,
5 unless the context clearly requires otherwise, have the following
6 meanings:—

7 “Emergency contraception,” any drug approved by the Federal
8 Drug Administration as a contraceptive method for use after
9 sexual intercourse.

10 Notwithstanding any other provision of law, a licensed pharma-
11 cist may initiate emergency contraception drug therapy manage-
12 ment in accordance with written, standardized procedures or
13 protocols developed by an actively practicing physician registered
14 with the commissioner to distribute or dispense a controlled sub-
15 stance in the course of professional practice pursuant to section 7
16 of this chapter, provided that such procedures or protocols are
17 filed at the pharmacist’s place of practice and with the board of
18 registration of pharmacy before implementation.

19 Prior to initiating pharmacy emergency contraception drug
20 therapy management authorized under this section, a pharmacist
21 shall have completed a training program approved by the commis-
22 sioner on emergency contraception, which training includes but is
23 not limited to proper documentation, quality assurance, and
24 referral to additional services, including appropriate recommenda-
25 tion that the patient follow-up with a medical practitioner.

26 The department of public health, board of registration in medi-
27 cine, and board of registration in pharmacy shall promulgate regu-
28 lations regarding the implementation of this section.

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