Jul 8, 2026

OTC Collaborative July Meeting

Attendance:

Members:

Delia Angulo Chen
Sabrina Bassett
Cynthia Baur
Aliyah Horton
Penny Jacobs
Jakeya Johnson
Neil Patrick McGarvey
Victoria Nichols
Christina Piecora
Amanda Li
Cailey Locklair
Sarah Case-Herron

Guests:

Brianna Deka, MDH
Robyn Elliott, Consultant

Staff:

Brett Jordan
Genesis Franco
Anecia Evans

Summary

The group revisited its May discussion of public education and messaging, deciding to draft proposed language for retail and pharmacy signs. There was also some discussion of retail counter coverage, previewing our September meeting topic. The Department of Health gave an overview of its reproductive health programs and examined the possible ways OTC products could integrate with these and other programs for uninsured Marylanders.

Decisions and next steps

- The collaborative decided to create recommended signage language for OTC birth control to ensure consistent messaging across retail settings.
- The group agreed to include a section in the final report focused on evaluation and measurement, specifically regarding the establishment and tracking of baseline claims.
- Brett will send a recap of past meetings ahead of the September meeting, as well as all proposed recommendations.

Details

- **Meeting Introduction and Agenda**: Brett Jordan welcomed the group and introduced Anecia Evans as the MCW's new policy and program associate. Cynthia E Baur outlined the meeting agenda, which included a check-in poll to identify expert input gaps, a follow-up on May's discussion regarding communication and outreach, a deep dive into public health programming, and next steps for the final report.

Opening poll responses: where do we want/need further expert input to complete the Collaborative's work.

- **Manufacturer Perspective on Opill**: Victoria Nichols recommended engaging a manufacturer to discuss the Opill three-year exclusivity period ending on the 13th of the month. Victoria Nichols noted that understanding how to handle non-branded versions and community awareness of the product would be beneficial, as the branded and non-branded versions are identical products.
- **Retail Pharmacy Operational Insights**: Victoria Nichols suggested seeking input from pharmacy chains to understand the operationalization of OTC claims at the point of sale. Penny Jacobs proposed including a college health center

pharmacist in future discussions. Aliyah Horton noted the ongoing involvement of independent pharmacy owner Neil McGarvey and a representative from the Maryland Association of Chain Drugstores (MACDS), and Christina Piecora emphasized the need to understand administrative burdens and resource requirements to make OTC coverage operational.

- **Integration of OTC Debit Cards**: Christina Piecora recommended seeking insights from public health programs already utilizing OTC debit cards, such as Medicare Advantage and certain Medicaid programs for prenatal and postpartum services, as a model for operationalizing OTC coverage.
- **Lessons Learned from Plan B**: Christina Piecora encouraged the group to hear from Plan B manufacturers regarding lessons learned, specifically the industry shift toward bulk donation programs rather than OTC coverage, to avoid repeating similar mistakes with other OTC contraceptives.

May meeting recap/continuation of discussion:

- **Communication and Education Principles**: Cynthia E Baur recapped May's discussion, highlighting that effective public information requires audience-specific messaging rather than a one-size-fits-all approach. The collaborative intends to identify existing communication pathways used by partners to better reach their communities.
- **Retail Signage Recommendations**: Victoria Nichols recommended developing consistent, multilingual, and accessible signage for retail environments to inform consumers about product coverage. The group discussed the importance of standardizing language to avoid consumer confusion, with Victoria Nichols suggesting the inclusion of guidance for directing consumers to resources if they have questions.
- **Testing Consumer Messaging**: Cynthia E Baur asked if any participants had tested specific messages in retail or health plan settings. Victoria Nichols was not aware of any current testing in this specific context, and the group agreed to continue monitoring for opportunities to gather such audience feedback.
- **Defining Success and Evaluation Metrics**: Aliyah Horton and Brett Jordan initiated a discussion on defining "success" to help guide report recommendations. Christina Piecora suggested measuring success through the increase in OTC claims, potentially tracking data by county to ensure underserved areas are reached. Robin recommended establishing a baseline for claims using the All-Payer Claims Database (APCD), Medicaid, and state employee databases, with the final recommendations assigning responsibility for ongoing tracking and reporting.

- **Measuring Success Outside of Retail**: Samantha Ritter argued that metrics for success should also include non-pharmacy channels like vending machines and bulk distribution, as these reach populations who may not be able to or may not feel comfortable entering a pharmacy. Cynthia E Baur suggested the final report should include a "lessons learned" section based on the collective experience of the group regarding other states' initiatives.

Presentation from the Department of Health on existing family planning programs:

- **Maryland Family Planning Program Overview**: Brianna Deka presented an overview of the Maryland Family Planning Program (MFPP), which operates under Title 10. The program is designed for clinical settings and serves as a vital safety net, though it faces challenges with transportation, language barriers for migrant populations, and adolescent comfort in clinical environments.
- **MFPP Demographics and Financial Data**: Brianna Deka reported that in calendar year 2025, the MFPP served over 50,000 clients across all 24 Maryland jurisdictions through 70 funded sites. More than 60% of clients were below the 100% Federal Poverty Level (FPL), and over 30,000 clients received services with zero out-of-pocket costs.
- **Contraceptive Method Utilization**: Brianna Deka presented data indicating that 33% of clients used long-acting reversible contraceptives (LARC), 21% used the pill, patch, or ring, and 16% used barrier methods. Notably, 22% of clients reported using no contraceptive method at the end of their visit, which highlights an opportunity for bulk distribution programs.
- **Clinical Partnerships and Sex Education Challenges**: Brianna Deka described the partnership with Upstream USA to increase contraceptive access in primary care and federally qualified health centers. The discussion also addressed the fragmentation of sex education in schools due to local control and opt-out policies, noting that only 10 of 24 jurisdictions receive MDH funding for sex education, and that selling contraceptives via vending machines in schools remains a criminal misdemeanor in Maryland under House Bill 380.
- **Higher Education Reproductive Health Mandates**: Brianna Deka highlighted 2023 legislation requiring public senior higher education institutions to provide 24/7 access to emergency contraception (EC) and other reproductive health services. This mandate, recently extended to community colleges, encourages the use of automated vending machines to bypass clinical bottlenecks.
- **Strategic Implementation Concepts**: Brianna Deka proposed moving toward implementation by leveraging existing clinic structures for referrals, utilizing data to pinpoint high-need areas, and establishing new bulk distribution

partnerships to extend the safety net to those who cannot access clinical services.

Group discussion:

- **Public Information Campaigns**: Cynthia E Baur inquired about public education campaigns at the state or county level. Samantha Ritter stated that they possess designed materials reflective of Maryland's diverse population that are not yet released and intend to align these with broader maternal health communication efforts.
- **Community-Based Organization (CBO) Partnerships**: Victoria Nichols and Samantha Ritter discussed the potential for partnerships with CBOs for product distribution. Samantha Ritter noted that while MDH has existing relationships with CBOs for adolescent sexual health, funding streams have previously limited the ability to distribute OTC products directly.
- **Period Pantries**: Jakia Johnson introduced the concept of "period pantries," which are similar to "little free libraries" and house period products, condoms, and emergency contraception at partner locations across Maryland. The organization currently maintains 10 to 11 locations, with three more scheduled to open by the end of the year.
- **Centralized Resource Mapping**: Christina Piecora and Samantha Ritter discussed the need for a centralized resource map for available contraceptives, as current data sources are disjointed. Samantha Ritter noted the importance of ensuring resources are located where people are already looking.
- **Bulk Purchasing Recommendations**: Victoria Nichols proposed that the collaborative recommend the State of Maryland include funding for bulk purchasing of contraceptives in the public health budget to overcome resource barriers.

Future Planning:

Aliyah Horton announced the next meeting for September, which will focus on retail coverage and the review of draft recommendations. The November 4 meeting will be dedicated to the draft final report. Brett Jordan noted that there may be opportunities for a legislative briefing after the report submission, depending on General Assembly priorities for the 2027 session.