

UPDATE: EMERGENCY CONTRACEPTION

This Alert replaces the Family PACT Clinical Practice Alert of April 2010 on Emergency Contraception.

Emergency contraception (EC) represents a “last chance” to prevent unintended pregnancy. Available forms of EC pills include ulipristal or levonorgestrel.

KEY POINTS

- **Ulipristal is more effective than levonorgestrel EC,¹ especially when taken more than 72 hours (3 days) after unprotected intercourse.^{2,3} Ulipristal is effective up to 120 (5 days) after unprotected intercourse.**
- **Ulipristal has little effect in preventing pregnancy for women who weigh more than 194 lbs (88kg).⁴**
- **Levonorgestrel EC has little effect in preventing pregnancy for women who weigh more than 154 lbs. (70kg).⁴**
- **Levonorgestrel EC is available in the United States (U.S.) without a prescription or age restrictions.**
- **Advance provision of EC pills has not reduced pregnancy rates.⁵**

QUESTIONS AND ANSWERS

Who are good candidates for EC?

- Women who have experienced a contraceptive failure such as a condom break or unprotected intercourse in the last five days.
- Women who have missed multiple pills, had a patch detach for more than 48 hours (2 days), or removed a ring for more than 48 hours in the five days prior to intercourse.⁶
- Women who want to “quick start” hormonal contraception.
- When “quick starting” copper IUC, EC pills are not needed because the copper IUC is a highly effective form of EC.

Are there any women who should not be given EC?

- EC is appropriate for any woman who does not desire pregnancy.
- EC is not effective for, and so should not be given to, women with a known pregnancy.
- Ulipristal has not been studied in women with severe renal or hepatic disease or severe uncontrolled asthma.

Are there any age restrictions on use of EC?

- No. Minors have the legal right to self-consent for family planning services, including the use of EC. California law does not require parental notification or consent for the provision of contraception (including EC or an IUC) to minors.⁷
- Levonorgestrel EC pills are available in U.S. pharmacies to men and women of all ages without a prescription.

QUESTIONS AND ANSWERS (CONTINUED)

How long after unprotected intercourse can EC be used?

- Ulipristal is Food and Drug Administration labeled for use up to 120 hours (5 days) after unprotected intercourse and has a lower failure rate than levonorgestrel EC between 72 to 120 hours,² making ulipristal the preferred EC pill during this time period. 1.8% of ulipristal EC users experience a pregnancy reflecting EC failure.²
- Levonorgestrel EC products are labeled for use up to 72 hours (3 days). However, studies show some efficacy up to 120 hours (5 days) after unprotected intercourse. 2.6% of levonorgestrel EC users experience a pregnancy reflecting EC failure.²
- Copper IUC is not labeled for use as EC, but in 42 studies of copper IUC placement within 5-10 days of unprotected intercourse (including a total of 7,034 women), the pregnancy rate was 0.1%.⁸

What is the effect of body weight on the efficacy of EC?

- Levonorgestrel EC works less well for overweight women (body mass index [BMI] 26-29 kg/m²), and not at all for obese women (BMI >30 kg/m²).⁴
- Ulipristal has some efficacy for overweight women, but works less well for obese women.⁴
- Copper IUC works extremely well, regardless of a woman's weight.

Woman's Weight	Levonorgestrel EC	Ulipristal EC
Healthy (BMI < 25 kg/m ²)	Effective	More effective
Overweight (BMI 25-29 kg/m ²)	Less effective	Effective
Obese (BMI ≥ 30 kg/m ²)	Not effective Limit of 154 lbs (70kg)	Less effective Limit of 194 lbs (88kg)

Can an intrauterine contraceptive (IUC) be used as EC?

- Use of the copper IUC for emergency contraception is off-label in the United States.
- For clients who desire IUC as a contraceptive method and who need EC, a copper IUC is extremely effective as EC⁸ and offers protection from pregnancy for at least 10 years.
- EC pills provide no additional benefit with placement of a copper IUC.
- Levonorgestrel IUC should not be used as EC, as there are no studies to support its effectiveness for this purpose. However, levonorgestrel IUCs may be placed the same day that EC pills are taken.

In comparing EC pills, how is ulipristal different from levonorgestrel?

- Ulipristal is more effective at preventing ovulation.¹
- Ulipristal is a progesterone receptor blocker; thus, if hormonal contraception is started immediately after use of ulipristal, a back-up contraceptive method is advised for two weeks (or until next menses).
- Levonorgestrel is a progestin; thus, if hormonal contraception is started immediately after use, a backup contraceptive method is advised for one week.
- Ulipristal requires a prescription while levonorgestrel pills can be obtained without a prescription.

Is any testing required before dispensing EC pills?

- A comprehensive health history or physical exam is not required for administration of EC pills.
- If a woman has had unprotected intercourse 10 days prior to seeking EC, pregnancy testing should be done prior to provision of EC. Pregnancy testing will be negative until at least 10 days after unprotected intercourse.

QUESTIONS AND ANSWERS (CONTINUED)

What effect does advance provision of EC pills have on clinical outcomes?

- In multiple studies,⁵ advance provision of EC pills has not reduced pregnancy rates, because few women use EC every time they have unprotected sex, even when they have EC pills at home.

Does EC cause an abortion?

- EC does not cause an abortion because it primarily works before implantation occurs. By preventing pregnancy, EC reduces the need for induced abortion.
- If EC pills are used by a woman who is already pregnant, the EC will not cause a miscarriage or birth defects.^{9,10}

What about the “Yuzpe regimen”?

- Combined oral contraceptives are less effective and cause more side-effects than other forms of EC.
- When no other EC alternatives are available, combined OCs containing levonorgestrel can be offered as detailed at (www.not-2-late.org; Info about Emergency Contraception > For Providers > EC dosing quick reference table).

FAMILY PACT AND MEDI-CAL POLICIES

Which EC pills are available in Family PACT and Medi-Cal?

- Both programs cover ulipristal and levonorgestrel pills for clinic and pharmacy dispensing.
- Eligible clinics can bill for ulipristal with Healthcare Common Procedure Coding System (HCPCS) code J3490-U5 and the appropriate National Drug Code (NDC).
- Eligible clinics can bill for levonorgestrel with HCPCS code J3490-U6 and the appropriate NDC.
- Pharmacies use the appropriate NDCs for billing ulipristal or levonorgestrel.
- A prescription is necessary for Medi-Cal and Family PACT to reimburse for either EC pill.
- Clients may receive only one EC dose per dispensing/visit and a maximum of six per year.

Do Family PACT and Medi-Cal cover placement of a copper IUC as emergency contraception?

- Yes, if the client intends to use the copper IUC as ongoing contraception and also needs EC.

Do Family PACT and Medi-Cal cover EC pills for women initiating other contraceptives?

- Yes, when clinically indicated. For example, women who report unprotected sex in the five days prior to initiating a contraceptive method.
- EC pills are not needed and should not be dispensed with placement of a copper IUC.

Can a woman receive EC pills “as needed” without choosing another method at the same visit?

- Yes, although she will remain at higher risk of unintended pregnancy without a regular contraceptive method.
- EC visits are a teachable moment and an opportunity to help clients achieve their pregnancy goals by helping them identify a regular contraceptive method that will work for them.

Are EC pills a Family PACT and Medi-Cal benefit for men worried about a condom failure?

- No. EC pills are only a Family PACT and Medi-Cal benefit when prescribed or dispensed to female clients. However, men may purchase levonorgestrel EC without a prescription from most pharmacies.

Providers should refer to the Medi-Cal and Family PACT Policies, Procedures, and Billing Instructions manuals for additional information on coverage and billing instructions.

RESOURCES AND REFERENCES

Helpful consumer resources:

- Bedsider (www.bedsider.org; home > methods > emergency_contraception).
- Princeton University Emergency Contraception Web site: www.not-2-late.com. Hotline: (888) NOT-2-LATE.
- Association of Reproductive Health Professionals (www.arhp.org; home > topics > emergency-contraception).

References:

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