A meeting of the Philadelphia Board of Health was held on Thursday, July 9, 2015, in the Municipal Services Building, 1401 J.F.K. Boulevard, 14th Floor, Room 1450.

Board Members Present: Jose A. Benitez, MSW; James W. Buehler, MD; Marla J. Gold, MD; Scott McNeal, DO; Susan Schewel, NP, PhD; Robert G. Sharrar, MD, MSc; Yolanda A. Slaughter, DDS, MPH.

Attendees: Althea Akers, MD, MPH; Jane Baker; Lauren Bruce; Nick Claxton; Debra DAlessandro; Emily Donovan; Adina Edwerike; Jennifer Gable; Melissa Weiler Gerber, JD; Natasha Graves; Roy Hoffman, MD; Sara Kinsman, MD; Mirna Law; Jack Ludmir, MD; Rachel Meadows; Kathleen Norris; Aasta Mehta; Jeff Moran; Jean Ottis; Ananya Ray; Courtney Schreiber, MD, MPH;

WELCOME AND INTRODUCTIONS

Health Commissioner and Board President James W. Buehler, MD, called the meeting to order at 5:35 PM. He welcomed the Board and guests.

Commissioner Buehler asked the Board to review the minutes of the meeting of May 14, 2015. It was moved that the minutes be approved as submitted. Motion seconded. Motion passed.

Dr. Buehler said that this evening’s board meeting will not involve consideration of new regulations but will be the second in a series of issue oriented meetings intended to provide the board with information that might result in discussions and recommendations on the topic from the Board to the Department of Public Health.

Dr. Buehler introduced Sara Kinsman, MD, PhD, director of the Philadelphia Department of Public Health’s Division of Maternal, Child, and Family Health to introduce the topic, introduce the presenters, and facilitate the discussion.

LONG ACTING REVERSIBLE CONTRACEPTION

Dr. Kinsman delivered an overview of the challenges to Increasing Access to Long Acting Reversible Contraceptives (LARC) in Philadelphia. (Attachment A)

Aletha Akers, MD, MPH, of the Children’s Hospital of Philadelphia, spoke about Ensuring Access to LARC for Adolescents. (Attachment B)

Dr. Gold asked Dr. Akers who is allowed to place the sub dermal implant, and why young
women would choose an IUD over a sub dermal method.

Akers said that individuals who are allowed to place either of these methods have been appropriately trained. Older adolescents or college students are often interested in longer acting methods. Sometimes side effects are a consideration. Some young women say that they are just not interested in having something under their arm and prefer an IUD. It really depends upon what is important to the individual woman.

Dr. Buehler asked Akers if there was any evidence of an increase in STD’s/HIV among those using LARC, because of a reduced use of condoms among these women.

Akers said that studies have looked at this issue show that selection of a particular contraception method does not adversely impact upon condom use. During counseling, women are advised to continue to use condoms as a method to prevent the transmission of STDs.

Dr. Sharrar asked who gives informed consent for the treatment of teens. Akers said that under State law teens may give consent for reproductive health services.

Dr. Schewel asked about the issues that arise in the use of electronic medical records and confidentiality regarding LARC services. Akers said that steps can be taken to ensure that records remain confidential, but in some practices there are loopholes and it cannot be guaranteed that confidential records will not be released. With commercial (private) insurance plans, an explanation of benefits may be sent to parents so confidential services cannot be provided.

Courtney Anne Schreiber, MD, MPH of the Hospital of the University of Pennsylvania, presented a discussion of Access to Highly Effective Postpartum Contraception. (Attachment C)

Dr. Gold noted that LARC is a woman controlled method meaning that once inserted, a woman does not need to remember to take a pill or other action to assure contraceptive effectiveness. Schreiber agreed and noted also that it is a forgettable method. Many people do not remember to take a pill every day. LARC overcomes some of the obstacles that short acting methods present.

Dr. Buehler asked if there is any contraindication to being on both LARC and PrEP. There is not, Schreiber said.

Melissa Weiler Gerber, JD, of AccessMatters, offered the final presentation of the evening, addressing Reimbursement-related Barriers to LARC Access. (Attachment D)

Dr. Buehler asked if higher reimbursement rates for teens should be recommended because of the extra time often required to provide this service to teens. Weiler Gerber said that this would be helpful because counseling teens is both more complex and more time consuming.

He invited the Board to express any concerns they may have about offering recommendations, and discuss what those recommendations might be. He said that the discussion thus far suggested recommendations in the areas of record keeping, capacity building, training, education, and
Jose Benitez said that he would like to hear more about community feedback concerning LARC.

Weiler Gerber said that there is a great deal of sensitivity about this as a reproductive justice issue. We need to ensure that LARC is being portrayed and perceived as a voluntary woman centered option so that no one feels pressured. Effectiveness is not the only factor people want to look at in evaluating an option. They want to consider side effects. There are cultural issues. We also want to provide education in the community that enables people to consider current information.

Dr. McNeal commented that many teens are getting their information from older friends or relatives, so it becomes important to educate the older generation as well as teens.

Dr. Buehler opened the meeting to questions and comments from the guests in attendance.

Dr. Buehler thanked the Board and the presenters. He adjourned the meeting at 7:15 PM.