

February 29, 2024

RI Department of Health Three Capitol Hill Providence, RI 02908-5097

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The Honorable Susan R. Donovan Chair, House Committee on Health and Human Services State House 82 Smith St. Providence, RI 02903

RE: H 7445 - An Act Relating to Businesses and Professions - Pharmacies (Tobacco Cessation)

Dear Chair Donovan:

I am writing in support of H 7445 from a public health policy perspective. H 7445 would authorize a licensed pharmacist to prescribe and dispense FDA-approved tobacco cessation drug products to a qualified patient. Please note that the Rhode Island Department of Health (RIDOH) supports the technical changes proposed in the Rhode Island Office of the Health Insurance Commissioner's (OHIC's) letter on this legislation. RIDOH also defers to OHIC on the provisions in H 7445 related to commercial health insurance coverage. RIDOH is also supportive of the letter that the Rhode Island Department of Behavioral Health, Developmental Disabilities, and Hospitals (BHDDH) has submitted on H 7445.

If enacted, the proposed legislation would increase access to tobacco cessation treatment for Rhode Islanders, especially those with limited financial means. More than 90% of United States residents live within five miles of a community retail pharmacy. 1,2,3 Pharmacies offer extended hours of operations that include nights, weekends, and holidays and serve culturally diverse populations. Pharmacists are typically well dispersed in the community and can be seen without an appointment. They are knowledgeable about drug interactions and able to respond quickly to any needed drug therapy modifications.

Providing pharmacists with the ability to prescribe tobacco cessation medication such as Nicotine Replacement Therapy (NRT), or offering brief cessation counseling, leverages a trusted and sustainable infrastructure in Rhode Island to increase the availability of tobacco treatment options for those who are experiencing lower income or have reduced access to transportation. This initiative helps assure that individuals, such as those with behavioral health conditions who may have regimented pharmaceutical routines, have further support in their tobacco quit journey in addition to their traditional healthcare professionals.

On January 17, 2017, CMS' Center for Medicaid and CHIP Services (CMCS) issued a <u>bulletin</u> encouraging states to expand the scope of pharmacy practice as a way of fostering immediate access to certain drugs. CMCS cited examples where states have expanded pharmacists'

¹ American Lung Association. <u>Indiana's Standing Order for Tobacco Cessation: A Case Study.</u> May 2020.

² American Lung Association. How Vermont Acted to Help More Smokers Quit: A Case Study. July 2022.

³ National Association of Chain Drug Stores (NACDS) Foundation. <u>Face-to-Face with Community Pharmacies</u>. Accessed December 6, 2021.

services to address national public health challenges and made it easier for patients to access, among other drugs, evidence-based tobacco cessation products. Allowing trained pharmacists to write prescriptions for cessation medications can increase access to low or no-cost treatments for Medicaid beneficiaries and other patients. With a prescription, Medicaid covers over-the-counter tobacco cessation products as well as prescription medications for this purpose.

Tobacco use is the leading cause of preventable death and disease in the United States, responsible for the deaths of 480,000 individuals each year, with approximately one out of every five deaths related to smoking.⁴ An additional 16 million Americans live with a disease caused by smoking. In Rhode Island, 29.8% of all cancer deaths are attributed to smoking, and each year, approximately 1,800 Rhode Island adults die from smoking. The annual healthcare costs in Rhode Island directly caused by smoking are \$744 million and Medicaid costs are \$233 million.⁵

According to the January 2020 Smoking Cessation: A Report of the Surgeon General, quitting smoking is beneficial at any age.⁶ Across demographics, most smokers want to quit.⁷ The Surgeon General's report found that only one out of three individuals who smoke used cessation medication approved by the FDA or behavioral health counseling to help them quit, which are the most effective interventions. Research through the Cochrane Systematic Reviews⁸ found that all forms of NRT make it more likely that a person's attempt to quit smoking will succeed, increasing the chances of stopping smoking by 50% to 60%.

According to a study in the *Journal of the American Pharmacists Association*,⁹ the pharmacy profession's role in tobacco cessation has evolved substantially in recent years through expanded authority and national efforts to advance pharmacy students' and licensed pharmacists' tobacco cessation knowledge and skills. According to the Smoking Cessation Leadership Center¹⁰ and the National Alliance of State Pharmacy Associations,¹¹ there are currently 18 states with statutes or regulations addressing pharmacist prescribing of tobacco cessation aids. New Mexico has had its pharmacists prescribe smoking cessation aids since 2004. Locally, Vermont, Maine, and New Hampshire have authorized pharmacist prescription authority for cessation.

RIDOH encourages your favorable consideration of this important legislation if coupled with OHIC's proposed technical amendments. The policy aligns with RIDOH's value to ensure access to quality health services for all Rhode Islanders, including the State's most vulnerable populations. Leveraging trusted community resources, such as pharmacies, reduces access barriers for tobacco treatment especially for populations most disproportionately impacted by health disparities.

⁴ Centers for Disease Control and Prevention. Current Cigarette Smoking Among Adults in the United States. May 2023.

⁵ Campaign for Tobacco-Free Kids. The Toll of Tobacco in Rhode Island. November 2023.

⁶ U.S. Department of Health and Human Services. <u>Smoking Cessation. A Report of the Surgeon General</u>. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. National Center for Chronic Disease Prevention and Health Promotion. Office on Smoking and Health. 2020.

⁷ Babb S, Malarcher A, Schauer G, Asman K, Jamal A. <u>Quitting Smoking Among Adults-United States, 2000–2015</u>. MMWR Morb Mortal Wkly Rep 2017;65:1457–1464.

⁸ Hartmann-Boyce J, Chepkin SC, Ye W, Bullen C, Lancaster T. Nicotine replacement therapy versus control for smoking cessation. Cochrane Database of Systematic Reviews 2018, Issue 5.

⁹ Adams AJ, Hudmon KS. <u>Pharmacist prescriptive authority for smoking cessation medications in the United States</u>. Journal of the American Pharmacists Association. Volume 58, Issue 3, 2018, 253-257.

¹⁰ Smoking Cessation Leadership Center. <u>Pharmacists Prescribing for Tobacco Cessation Medications</u>. January 2022.

¹¹ National Alliance of State Pharmacy Associations. Pharmacist Prescribing: Tobacco Cessation Aids. March 2022.

Sincerely,

Utpala Bandy, MD, MPH

Interim Director

CC: The Honorable Members of the House Committee on Health and Human Services

The Honorable Teresa A. Tanzi
Nicola McCarty, Chief Legal Counsel

Nicole McCarty, Chief Legal Counsel Lynne Urbani, Director of House Policy