



Testimony to the Public Health Committee – March 4, 2019

**Raised Bill No. 6543: An Act Permitting Pharmacists to Prescribe Tobacco Cessation Products**

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Thank you for the opportunity to submit testimony in strong support of the *Raised Bill 6543: An Act Permitting Pharmacists to Prescribe Tobacco Cessation Products*. My name is Fei Wang, and I am an Associate Clinical Professor at the University of CT School of Pharmacy and Director of the Tobacco Prevention and Cessation Program at Hartford Hospital's Brownstone Clinics which provides comprehensive ambulatory care services to the medically underserved and uninsured residents of Hartford.

The substantial reduction in smoking in the United States represents one of the most important public health advances of the last 50 years. However, disparities in tobacco use continues to persist across defined groups. Prevalence is disproportionately higher in people of low socioeconomic status (25%), on Medicaid insurance (25%), people without insurance (28%), and in those with mental illness and substance use disorders (36%). Today, we are also facing emerging high-tech e-cigarette products that are capable of delivering nicotine levels comparable to or higher than traditional tobacco cigarettes and addicting a whole new generation of youth to nicotine. According to the 2018 National Youth Tobacco Survey, the percentage of high school-aged adolescents who reported using e-cigarettes during the past 30 days rose by 78% from 2017 to 2018.

We know that success in cessation can be increased with the combination of behavioral counseling and medication therapy to support withdrawal symptoms. Therefore, barrier-free access to tobacco cessation counseling and approved medications will increase population-level

smoking cessation and improve the public health of our most vulnerable citizens. Many pharmacies already support banning tobacco sales within their stores and since 2014, several states have also implemented state-wide prohibitions.

Community pharmacies are highly accessible and convenient locations and therefore pharmacists are uniquely positioned to reduce the prevalence of tobacco use because of their accessibility to these vulnerable and hard to reach populations. Pharmacists in the community can improve access to tobacco services through appropriate screening and assessment, delivery of brief interventions, prescribing cessation medications, and improving referrals to the state quitline and other local in-person cessation services. Currently, there are 7 medications that have an FDA indication for smoking cessation; three of these nicotine replacement products are available as OTC medications (patch, gum, and lozenge). Medication therapy to support withdrawal symptoms (e.g. nicotine gum), requires adequate patient education for effective use.

Pharmacists have demonstrated the ability to achieve tobacco quit rates similar to, and in some studies higher than, other health professionals. Recently eight states have created pathways for autonomous pharmacist prescriptive authority that enables pharmacists to prescribe smoking cessation medications to facilitate access of patients to smoking cessation medications. In support of this initiative, UConn School of Pharmacy received funding support from CT DPH to develop a Certificate Program in Tobacco Cessation for pharmacists. This will be an ACPE-approved continuing education on-line curriculum consisting of 15 contact hours. I have included an addendum of the learning objectives, content experts, and course design for your review. I am the primary investigator of this DPH and UConn partnership to increase cessation capacity to the medically underserved community. I strongly urge this committee to consider passage of this proposed bill which will improve public health and provider broader access of tobacco cessation counseling and medications to the most vulnerable citizens.