



July 30, 2023

Ms. Sarah Boateng
Principal Deputy Assistant Secretary for Health
U.S. Department of Health and Human Services
Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

RE: Request for Information: Draft HHS 2023 Framework To Support and Accelerate Smoking Cessation

Submitted via email to HHSSmokingCessationFramework2023@hhs.gov

Dear Ms. Boateng:

The American Pharmacists Association (APhA) is pleased to submit comments on the Department of Health and Human Services' (HHS) request for information titled "[Draft HHS 2023 Framework To Support and Accelerate Smoking Cessation](#)." APhA supports HHS' goal to "ensure that every person in America has access to comprehensive evidenced-based cessation treatment." APhA's comments will focus on Goal Number 4 of HHS' draft framework.

APhA is the only organization advancing the entire pharmacy profession. APhA represents pharmacists, student pharmacists, and pharmacy technicians in all practice settings, including but not limited to community pharmacies, hospitals, long-term care facilities, specialty pharmacies, community health centers, physician offices, ambulatory clinics, managed care organizations, hospice settings, and government facilities. Our members strive to improve medication use, advance patient care, and enhance public health.

[Goal 4: Increase Access to and Coverage of Comprehensive High-Quality Cessation Treatment](#)

APhA supports prioritizing tobacco cessation as a health goal for all Americans. We appreciate HHS' intent to broaden strategies to increase access to smoking cessation treatments, especially in settings where some populations may experience barriers to receiving this treatment. Pharmacists are the medication experts of the health care team and play a vital role in assisting patients to manage and improve their medication use — including those used for tobacco cessation. As of 2022, [17 states](#) have made or are considering changes to pharmacists' authority to allow them to prescribe nicotine replacement therapies (NRTs) or other FDA-approved medications and more states are considering making similar changes. In these states, pharmacists can either prescribe NRT themselves or dispense NRT without a prescription in accordance with a protocol, standing order, or

other process. Given that NRT is over the counter (OTC), there is concern that many patients, especially Medicare and Medicaid beneficiaries are not able to afford NRT by paying out of pocket. Given the high accessibility of pharmacist provided NRT, there is concern that NRT furnished by a pharmacist without a prescription will not be covered by the Medicare Part D program and by state Medicaid programs. However, there are examples of state Medicaid programs covering OTC medications that are provided by pharmacists. For example, Massachusetts Medicaid requires coverage of OTC emergency contraceptives when dispensed by a pharmacist without a prescription.¹ As pharmacists' authority to prescribe OTC medications continues to expand, it is essential to ensure coverage of these needed medications for patients. Accordingly, APhA recommends HHS work with CMS to require Medicare Part D and Medicaid include coverage for OTC medications prescribed, furnished, or dispensed without a prescription by a pharmacist.

Additionally, pharmacists are the most accessible health care providers, interacting and communicating with patients at the point-of-sale for both prescription and non-prescription medications. For patients who report tobacco use, pharmacists are available to advise these patients about the health risks associated with smoking, and for those patients who indicate a willingness to quit smoking, pharmacists are available to provide information and recommendations about smoking cessation prescription and non-prescription products, tools, and resources; and for patients who are willing to enroll in a smoking cessation program, some pharmacists and pharmacies offer specific smoking cessation programs and coaching services in both inpatient and outpatient care settings to help support patients' efforts to quit smoking or other tobacco use. We assert that pharmacists should continue to play an important role in smoking cessation treatment programs.

APhA recommends HHS review our [*Promising Practices for Pharmacist Engagement in Tobacco Cessation Interventions*](#) resource, which was developed to identify and highlight innovative ways in which pharmacists are engaged in cessation interventions for individuals who use tobacco products. It is composed of case studies on seven practices in which pharmacists have attained some level of authority, access, and sustainability to deliver tobacco cessation services. Lastly, APhA also emphasizes that by enacting laws and creating sustainable payment models, pharmacists can serve as a vital resource in providing smoking cessation services and/or treatments, especially for those in medically underserved and rural areas.

Conclusion

APhA appreciates the opportunity to provide feedback on HHS' request for information titled "Draft HHS 2023 Framework To Support and Accelerate Smoking Cessation." APhA recommends HHS include pharmacists in the development and implementation of any smoking cessation programs and services, including a mechanism to directly reimburse pharmacists for providing these services to Medicare beneficiaries and encourage state Medicaid programs to also cover these services. Integrating pharmacists into these team-based efforts will help to ensure that the incidence and prevalence of the use of tobacco products are significantly reduced and public health is

¹ Coursolle A, McCaman. Coverage of Over-the-Counter Drugs in Medicaid. National Health Law Program. Available at <https://healthlaw.org/wp-content/uploads/2019/12/OTC-Drugs-in-Medicaid-FINAL.pdf>

protected. If you have any questions or need any additional information please contact Heather Boyd, Director, Health Policy at hboyd@aphanet.org.

Sincerely,

Michael Baxter

Michael Baxter
Acting Head of Government Affairs