

Testimony in Support of Senate Bill 62 (2022)

Pharmacists - Aids for the Cessation of Tobacco Product Use
Before the Education, Health, and Environmental Affairs Committee: February 2, 2022

Senate Bill (SB) 62 authorizes a pharmacist to prescribe and dispense nicotine replacement therapy medications approved by the Food and Drug Administration (FDA) as an aid for the cessation of the use of tobacco products and requires the Board of Pharmacy to adopt regulations describing standard procedures and pharmacist requirements.

Pharmacist authority to prescribe and dispense medications approved by the FDA as an aid for the cessation of the use of tobacco products is not new. In 2004, New Mexico was the first state to give pharmacists this authority. Currently, pharmacists have this authority in 14 states:

State	NRT	Varenicline and Bupropion
New Mexico	X	X
California	X	
Vermont	X	X
W. Virginia	X	
Arkansas	X	
Missouri	X	
Iowa	X	
Minnesota	X	X
Idaho	X	X
Indiana	X	X
Arizona	X	
Maine	X	
Colorado	X	X
Oregon	X	X

All states have requirements like the provisions in SB 62: pharmacists prescribe and dispense but do not diagnose; standard procedures; regulation by the state Board of Pharmacy; completion of a training program; and requirements for recording the medication dispensed and patient follow-up with a primary care physician. [According to the U.S. Department of Health and Human Services, National Cancer Institute, for most people, there is no need to talk to a doctor or health care provider before using NRT.](#)

Conclusion

Pharmacist authority to prescribe and dispense medications approved by the FDA as an aid for the cessation of the use of tobacco products is a well-studied practice that is gaining momentum across the country. Pharmacists are properly trained to prescribe these medications and have been safely doing so for almost 20 years. Pharmacists are accessible, knowledgeable, and trusted community healthcare providers who have all the tools necessary to assist smokers in quitting.

This testimony is submitted on behalf of the Public Health Law Clinic at the University of Maryland Carey School of Law and not by the School of Law, the University of Maryland, Baltimore, or the University of Maryland System.