



THE MARYLAND HOUSE OF DELEGATES  
ANNAPOLIS, MARYLAND 21401

January 20, 2020

**Testimony in Support of HB 28:  
Pharmacists – Aid for the Cessation of Tobacco Product Use**

Chair Pendergrass and Members of the House Health and Government Operations Committee,

Research shows that smoking is the leading cause of preventable death in the United States and around the world. Research also shows that most smokers want to quit. With **HB 28**, Maryland would take a step toward helping them. With this bill, we would save lives.

**HB 28** would grant licensed pharmacists the right to prescribe and dispense medications approved by the U.S. Food and Drug Administration as tobacco cessation aids. Our state law already covers tobacco cessation medication and services offered by licensed health care practitioners with Medicaid and the Maryland Children’s Health Program. **HB 28** would simply expand access to those services by extending the same provisions to licensed pharmacists.

Though there are over-the-counter options for nicotine replacement therapies available for purchase, insurance companies do not cover these, and financial barriers can prohibit some patients from purchasing these products. A two-week supply of patches can cost \$30 to \$45, while a pack of cigarettes averages about \$7. So if someone has a \$10 bill in their pocket, which product are they more likely to buy? With a prescription, however, most patients can get nicotine replacement therapies with a \$0 copay. Transportation barriers can prohibit patients from getting to the doctor or the store, but many pharmacies have telemedicine and delivery services that can help get these products directly to the people who need them.

So lower-income people currently have a harder time accessing nicotine replacement therapies. Meanwhile, people in minority communities face disproportionate health impacts from nicotine use. We have research showing that smokers in minority communities are less likely to use counseling and medical aids to stop smoking, and they are more likely to die from smoking-related complications. Keeping in mind the addictive nature of nicotine (which has

been compared to cocaine or heroin), and the stigma attached to addiction, it seems to me that people with tobacco dependence need our help, not our persecution.

I'll note that this bill passed unanimously in the Senate Finance Committee and on the Senate floor. It was referred to the HGO Committee on March 17, 2020, but due to the COVID-19 pandemic, this bill did not get a hearing on our committee. However, prior to the pandemic, feedback from several rounds of hearings was worked into the legislation as it stands today. Authorizing pharmacists to provide tobacco cessation aids is safe, and the Centers for Disease Control and Prevention has stated that the use of these products is appropriate for most adult smokers. I'll also note that, according to the CDC, Maryland spent \$2.7 billion in 2009 to manage the healthcare costs of smokers. Each year, we spend billions treating individuals for preventable diseases related to smoking. With this bill, we could substantially decrease this annual tax dollar expenditure and improve the quality of care and population health outcomes.

**HB 28** would address a double-edged inequity and help more Marylanders quit smoking and improve their health habits. Reduced smoking rates would curb the impacts of chronic diseases such as high blood pressure, diabetes, heart disease, lung disease, and many types of cancers in our state. I hope you will join me in supporting this bill, and the vision for a healthier Maryland.

Respectfully,

A handwritten signature in black ink, appearing to read "H. Bhandari", with a long, sweeping horizontal line extending to the right.

Delegate Harry Bhandari  
Maryland Legislative District 8