

**NDSU** NORTH DAKOTA  
STATE UNIVERSITY

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# Partnering with Pharmacists for Tobacco Treatment

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# Objectives

**After this presentation, participants will be able to:**

- **Define** the scope of pharmacists in North Dakota with regard to treating tobacco use.
- **Identify** opportunities to partner with pharmacists to provide tobacco cessation care.
- **Review** patient smoking cessation scenarios that necessitate a referral of a patient to their primary health care provider instead of a pharmacist.

# Disclosures

- I have no financial relationships with ineligible companies to disclose.

# Why Pharmacists?

- >480,000 people die from tobacco-related disease every year in the US!

	North Dakota	National Average
Adult smoking	17.4% 2020 BRFSS <sup>1</sup>	12.5% <sup>2</sup>
Youth smoking	5.9% 2019 YRBS <sup>1</sup>	1.9% <sup>3</sup>
Adult smokeless (SLT)	11.1% 2020 BRFSS <sup>1</sup>	2.3% <sup>4</sup>
Youth (SLT)	7.5% 2021 YRBS <sup>1</sup>	1.2% <sup>5</sup>
Adult ENDS/vape	22.1% 2019 ATS <sup>1</sup> 17.9% 2020 BRFSS <sup>1</sup>	3.2% <sup>6</sup>
Youth ENDS/vape	33.1% 2019 YRBS <sup>1</sup> and 21.2% 2021 YRBS <sup>1*</sup>	11.3% <sup>7</sup>

# Why Pharmacists?

- Pharmacists are accessible, especially in rural areas
- Unique pharmacist ownership law in ND
- Pharmacists actively lead tobacco cessation services in many settings<sup>8</sup>
  - Ambulatory care
  - Community pharmacy
- Pharmacist scope of practice...

# Pharmacists' Scope of Practice

2019 North Dakota  
Century Code  
Title 43  
Occupations and  
Professions  
Chapter 43-15  
Pharmacists<sup>9</sup>

- of a licensed pharmacist, as permitted by the board.
24. "Practice of pharmacy" means the interpretation, evaluation, and monitoring of prescription orders and patient drug therapy; the compounding, dispensing, labeling of drugs and devices except labeling by a manufacturer, packer, or distributor of nonprescription drugs and commercially packaged legend drugs and devices; the participation in drug selection, drug monitoring, drug administration, drug regimen review, the provision of these acts or services necessary as a primary health care provider of pharmaceutical care, and drug utilization evaluations; the proper and safe storage of drugs and devices and the maintenance of proper records for this storage; the responsibility for advising, consulting, and educating if necessary or if regulated, patients, public, and other health care providers on the rational, safe, and cost-effective use of drugs including therapeutic values, content, hazards, and appropriate use of drugs and devices; the participation in interpreting and applying pharmacokinetic data and other pertinent laboratory data to design safe and effective drug dosage regimens; if appropriate and if regulated, the participation in drug research either scientific or clinical as investigator or in collaboration with other investigators for the purposes of studying the effects of drugs on animals or human subjects, with other drugs or chemicals, and with drug delivery devices; emergency pharmacy practice; prescriptive practices as limited under this chapter; the performance of laboratory tests to provide pharmaceutical care services which are waived under the Federal Clinical Laboratory Improvement Act of 1988 [Pub. L. 100-578, section 2; 102 Stat. 2903; 42 U.S.C. 263a et seq.], as amended; and the offering or performing of those acts, services, operations, or transactions necessary in the conduct, operation, management, and control of pharmacy.
25. "Practitioner" means an individual licensed, registered, or otherwise authorized by the

# Tobacco Cessation Prescribing

- As of January 1<sup>st</sup>, 2022, pharmacists have **prescriptive authority** for tobacco cessation medications!

Chapter 61-04-15. Limited prescriptive authority for tobacco cessation therapies.<sup>10</sup>



# Tobacco Cessation Prescribing

- Pharmacist Requirements:
  - Active Pharmacist's **license** in ND
  - **Education** in tobacco cessation, approved by the ND Board of Pharmacy
    - E.g. NDQuits/National Jewish Health Training Module:  
<https://quitlogixeducation.org/northdakota/>
  - Be acting in good faith and exercising **reasonable care** (based on current clinical best practices)
  - Maintain and have readily available a current copy of **statewide protocol**

# Tobacco Cessation Prescribing

- **Medications included:**
  - Nicotine gum
  - Nicotine lozenge
  - Nicotine patch
  - Nicotine inhaler
  - Nicotine nasal spray
  - Bupropion SR
  - Varenicline
  - ***Combinations of these products***

# Tobacco Cessation Prescribing

- **ND Statewide Protocol elements:**
  - Patient consent
  - Apply 5 A's/similar strategy
  - Health screening and documentation of service
    - Patient history (medical and social)
    - Concurrent illness, allergies/hypersensitivities
    - Medication history
  - High-risk patients:
    - Pregnancy, or plan to become pregnant in 3 months
    - Medication contraindication
  - Provide necessary medication information

# Tobacco Cessation Prescribing

- **ND Statewide Protocol elements (cont'd):**
  - Provide behavioral counseling and/or refer to other resources (e.g. NDQuits)
  - Follow up
  - Communicate with patient's PCP “as soon as reasonably possible”, and provide patient with record
  - Maintain documentation for 5 years
    - Provide documentation to patient/patient's provider upon request

# Pharmacist Providers

- **Provider Status** in North Dakota



## Pharmacist Prescribing:

- By state law, [NDCC 43-15-01](#), a pharmacist is able to bill their NPI as a prescriber. To bill as a prescriber, you must enroll as a provider with ND Medicaid, or the claim will be rejected. This is a federal requirement.
- Please enroll as a provider if you anticipate billing ND Medicaid as a prescriber to avoid claims processing issues.
- Please see the [ND Medicaid Provider Manual](#) for more information about becoming a ND Medicaid provider.

# Tobacco Cessation Counseling

- **ND Medicaid Coverage**<sup>11</sup>
  - Tobacco cessation counseling for all members.
  - Previously only covered for pregnant women.
  - Counseling must be provided face-to-face by or under the supervision of a physician or ***other health care professional who is legally authorized to furnish such services under state law and within their scope of practice and is enrolled as a ND Medicaid provider.***
  - CPT© Code: 99406 – Smoking and tobacco cessation counseling visit; intermediate, greater than three minutes up to 10 minutes.
  - CPT© Code: 99407 - Smoking and tobacco cessation counseling visit; intensive, greater than 10 minutes.



# Pharmacists' Scope of Practice

- Pharmacists are *independent prescribers* of tobacco cessation medications in ND
- Pharmacists are recognized as **providers** in ND
- Pharmacists **can bill** as providers in ND

# Opportunities to Partner with Pharmacists for Tobacco Cessation



# Tobacco Cessation in Community Pharmacies

- **What does the future hold?**
  - Ask-Advise-Refer
    - Every patient is asked about tobacco use
    - Tobacco users advised to quit
    - Refer patients to NDQuits, local quit program, or in-house cessation service
  - In-house cessation service
    - Pharmacists provide counseling (e.g. 5 A's)
    - Pharmacists prescribe tobacco cessation medications
    - Follow up scheduled
    - Tobacco cessation counseling is billed to patient insurance



# Current State

- ND Pharmacists Service Enhancement Survey
- 235 respondents (23% of active pharmacists living in ND)
- General practice setting (n=177)
  - Inpatient: 49 (27.7%)
  - Outpatient: 128 (72.3%)

# Services Provided

Service	%	Count
MTM: Comprehensive medication review	11.87%	80
Immunizations	11.42%	77
Medication adherence services	7.72%	52
Adverse Drug Reactions/Events	7.72%	52
MTM: Targeted intervention program	7.42%	50
ONE Program (Opioid and Naloxone Education)	6.53%	44
Comprehensive Medication Management	5.19%	35
Anticoagulation	5.19%	35
Create personal medication record/list	4.75%	32
Chronic disease state management	3.86%	26
I do not provide medication optimization services	3.56%	24
Residence referral to medical provider	3.26%	22
Tobacco cessation	3.12%	21
Long term care chart reviews	2.82%	19
Health and wellness screenings	2.82%	19
Transitions of care	2.67%	18
Continuous glucose monitoring	2.52%	17
Opioid tapers	1.34%	9
Other (please specify)	1.19%	8
1815 pilot site services	1.04%	7
Falls prevention	1.04%	7
Remote patient monitoring (RPM)	0.89%	6
Nutrition / weight management	0.89%	6
Pharmacogenomics	0.74%	5
Medication assisted treatment (MAT)	0.45%	3
Total	100%	674

# Pharmacist Billing Practices

Billing Method/Codes Submitted	%	Count
E&M code(s) (99211 (“incident-to”), 99212, 99213, 99214, 99215)	2.69%	6
Medicare Annual Wellness Visit (G0438, G0439)	2.69%	6
Continuous Glucose Monitoring (95249, 95250, 95251)	2.69%	6
INR Monitoring (93792, 93793)	2.69%	6
Tobacco Cessation (99406, 99407)	1.79%	4
Transitional Care Management (99495, 99496)	0.45%	1
Chronic Care Management (99490, G2058)	0.45%	1
Diabetes Self-Management Training (G0108, G0109)	0.45%	1
Medicare Diabetes Prevention Program (G9873-G9879, G9880-G9885, G9890, G9891)	0.45%	1
Primary Care Management (G2065)	0.00%	0
Complex Care Management (99487, 99489)	0.00%	0
Chronic Care Management in FQHC (G0511)	0.00%	0
Remote Physiologic Monitoring (99453, 99457, 99458)	0.00%	0

# Opportunities for Partnership

- Think – Pair – Share



# Opportunities for Partnership

- More efficient medication access
- Another referral source
- Monitoring of drug-drug and tobacco-drug interactions
  - [https://smokingcessationleadership.ucsf.edu/sites/smokingcessationleadership.ucsf.edu/files/Documents/FactSheets/376701\\_CABHWI\\_Drug%20Interactions\\_2022\\_PRINT.pdf](https://smokingcessationleadership.ucsf.edu/sites/smokingcessationleadership.ucsf.edu/files/Documents/FactSheets/376701_CABHWI_Drug%20Interactions_2022_PRINT.pdf)
- Optimize tobacco cessation medication therapy
  - Dual NRT/combination pharmacotherapy
  - High dose NRT
  - Follow up and monitoring

# Pharmacist Care Scenarios

- Specific scenarios:
  - Immunizations
  - Primary Care
  - Pre-surgical
  - Transitions of care
  - Rural areas
  - Public Health partnership

# Pharmacist Care Scenarios

- **When does a primary care provider need to be involved?**
  - Pediatric/Adolescent patients
  - Pregnancy/Breastfeeding (or planning to become pregnant)
  - Using non-FDA approved medications
    - Nortriptyline
    - Clonidine



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  - A. Conduct a health screening, which will include patient's medical and social history.
  - B. Perform a breath carbon monoxide test.
  - C. Get approval from all patients' primary health care provider to prescribe any FDA-approved tobacco cessation medication.
  - D. Ensure that the patient is first enrolled in ND Quits before providing tobacco treatment.

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- **Which of the following patients would be ideal to refer for tobacco treatment, including obtaining medication prescriptions, to a pharmacist?**
  - A. 28 year-old female who is currently 14 weeks pregnant.
  - B. A 56 year-old male who has spine surgery scheduled and needs to quit smoking prior to surgery.
  - C. A 42 year-old male who tells you that he is allergic to all of the tobacco cessation medications.
  - D. A 14 year-old female who is currently using a pod-based ENDS device.

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# References

1. North Dakota data from: [https://www.health.nd.gov/sites/www/files/documents/Files/HSC/CHS/Tobacco/Tobacco\\_Surveillance\\_Data.pdf?ver=6](https://www.health.nd.gov/sites/www/files/documents/Files/HSC/CHS/Tobacco/Tobacco_Surveillance_Data.pdf?ver=6)
2. Adult smoking rate: [https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/index.htm#:~:text=In%202020%2C%2012.5%25%20of%20U.S.,smokers%20want%20to%20quit%20smoking](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/index.htm#:~:text=In%202020%2C%2012.5%25%20of%20U.S.,smokers%20want%20to%20quit%20smoking)
3. Youth cigarettes, In 2021, nearly 2 of every 100 high school students (1.9%) reported that they had smoked cigarettes in the past 30 days. [https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/youth\\_data/tobacco\\_use/index.htm#:~:text=Each%20day%20in%20the%20U.S.,youth%20start%20smoking%20every%20day](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/youth_data/tobacco_use/index.htm#:~:text=Each%20day%20in%20the%20U.S.,youth%20start%20smoking%20every%20day)
4. Adult SLT, More than 2 in every 100 (2.3%) adults aged 18 or older reported current use of smokeless tobacco products. This represents 5.7 million adults. [https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/smokeless/use\\_us/index.htm#:~:text=Adult%20Smokeless%20Product%20Tobacco%20Use%20\(National\)&text=More%20than%202%20in%20every,men%20currently%20used%20smokeless%20tobacco](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/smokeless/use_us/index.htm#:~:text=Adult%20Smokeless%20Product%20Tobacco%20Use%20(National)&text=More%20than%202%20in%20every,men%20currently%20used%20smokeless%20tobacco)
5. Youth SLT, In 2021, about 1 of every 100 high school students (1.2%) reported that they had had used smokeless tobacco in the past 30 days. [https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/youth\\_data/tobacco\\_use/index.htm#:~:text=Each%20day%20in%20the%20U.S.,youth%20start%20smoking%20every%20day](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/youth_data/tobacco_use/index.htm#:~:text=Each%20day%20in%20the%20U.S.,youth%20start%20smoking%20every%20day)
6. Adults ENDS/vape. This was harder to find on a national level. I found this: In 2018, 3.2% of adults were current e-cigarette users. <https://www.cdc.gov/nchs/products/databriefs/db365.htm>
7. Youth ENDS/vape, In 2021, about 1 of every 9 high school students (11.3%) reported that they had used electronic cigarettes in the past 30 days. [https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/youth\\_data/tobacco\\_use/index.htm#:~:text=Each%20day%20in%20the%20U.S.,youth%20start%20smoking%20every%20day](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/youth_data/tobacco_use/index.htm#:~:text=Each%20day%20in%20the%20U.S.,youth%20start%20smoking%20every%20day) .
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11. ND Medicaid Tobacco Cessation Coverage. <https://www.nd.gov/dhs/info/pubs/docs/medicaid/provider-newsletter-dec2021.pdf>



# Questions?



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