

2026 -- H 7534

LC004623

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2026

A N A C T

RELATING TO BUSINESSES AND PROFESSIONS -- PHARMACIES

Introduced By: Representatives Tanzi, Stewart, Giraldo, Edwards, Bennett, Diaz,
Fogarty, Ajello, and Shallcross Smith
Date Introduced: February 06, 2026

Referred To: House Health & Human Services

It is enacted by the General Assembly as follows:

- 1 SECTION 1. Chapter 5-19.1 of the General Laws entitled "Pharmacies" is hereby amended
2 by adding thereto the following section:
- 3 **5-19.1-39. Tobacco cessation therapy prescriptive authority.**
- 4 (a) A pharmacist who is licensed pursuant to this chapter and who meets the requirements
5 of this section may prescribe and dispense FDA-approved tobacco cessation drug therapies to a
6 qualified patient pursuant to rules and regulations adopted by the board of pharmacy, subject to the
7 approval of the director of health in consultation with the director of behavioral healthcare,
8 developmental disabilities and hospitals.
- 9 (b) For the purposes of this section, "qualified patient" means a patient who:
- 10 (1) Is at least eighteen (18) years of age or of minimum age based on the most recent
11 guidance provided by the FDA;
- 12 (2) Is willing to participate in a structured tobacco cessation program consisting of an initial
13 evaluation and appropriate follow-up visits with the pharmacist prescribing tobacco cessation
14 products; and
- 15 (3) Has been educated on symptoms of nicotine toxicity, common and/or severe adverse
16 effects of prescribed medication(s), and when to seek medical treatment.
- 17 (c) Prior to prescribing tobacco cessation therapies, the pharmacist shall have completed
18 tobacco cessation education approved by the state board of pharmacy.
- 19 (d) The pharmacist shall refer or consult prior to prescribing regarding high-risk patients

1 or patients with an identified contraindication to FDA-approved tobacco cessation drug therapies
2 to the patient's primary care provider, as applicable, or to another provider, as appropriate.

3 (e) All pharmacists participating in prescribing therapy for tobacco cessation shall follow
4 the most updated guidelines and standards of care as approved by the board of pharmacy, subject
5 to the approval of the director of the department of health in consultation with the director of
6 behavioral healthcare, developmental disabilities and hospitals.

7 (1) Pharmacists shall implement the most updated clinical practice guidelines to help
8 patients quit using all forms of tobacco.

9 (2) Pharmacists' services shall include an educational component to include counseling on
10 medication therapies and cessation strategies as well as referral to sources provided by the
11 department of health.

12 (f) Notification of the patient screening, the prescription record and the follow-up care plan
13 shall be provided to the patient's primary care provider, as applicable, within five (5) business days
14 following the prescribing of a tobacco cessation product.

15 (g) The definition of a qualified patient is subject to adaptation pursuant to rules and
16 regulations adopted by the board of pharmacy, subject to the approval of the director of the
17 department of health in consultation with the director of behavioral healthcare, developmental
18 disabilities and hospitals.

19 (h) Tobacco cessation drug therapies shall be covered by Medicaid upon approval of the
20 Medicaid section 1115 demonstration waiver to be submitted by the secretary of the executive
21 office of health and human services pursuant to chapter 12.4 of title 42.

22 SECTION 2. Chapter 27-18 of the General Laws entitled "Accident and Sickness Insurance
23 Policies" is hereby amended by adding thereto the following section:

24 **27-18-96. Coverage for pharmacists' services.**

25 (a) Every group health insurance contract, or every group hospital or medical expense
26 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by
27 any health insurance carrier, on or after January 1, 2027, shall provide coverage for the services
28 within the lawful scope of practice of pharmacists pursuant to § 5-19.1-2 if the plan would have
29 provided coverage if the service had been performed by a physician, advanced practice nurse, or
30 physician assistant. No nonprofit medical service corporation may require supervision, signature,
31 or referral by any other healthcare provider as a condition of reimbursement to a pharmacist;
32 provided that, no nonprofit medical service corporation may be required to pay for duplicative
33 services actually rendered by both a pharmacist and any other healthcare provider.

34 (b) The health plan shall include an adequate number of pharmacists in its network of

1 participating medical providers. The participation of pharmacies in the plan network's drug benefit
2 does not satisfy the requirement that plans include pharmacists in their networks of participating
3 medical providers.

4 (c) The healthcare benefits outlined in this section shall apply only to services delivered
5 within the health insurer's provider network; provided that, all health insurers shall be required to
6 provide coverage for those benefits mandated by this section outside of the health insurer's provider
7 network where it can be established that the required services are not available from a provider in
8 the health insurer's network.

9 SECTION 3. Chapter 27-19 of the General Laws entitled "Nonprofit Hospital Service
10 Corporations" is hereby amended by adding thereto the following section:

11 **27-19-88. Coverage for pharmacists' services.**

12 (a) Every group health insurance contract, or every group hospital or medical expense
13 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by
14 any health insurance carrier, on or after January 1, 2027, shall provide coverage for the services
15 within the lawful scope of practice of pharmacists pursuant to § 5-19.1-2 if the plan would have
16 provided coverage if the service had been performed by a physician, advanced practice nurse, or
17 physician assistant. No nonprofit medical service corporation may require supervision, signature,
18 or referral by any other healthcare provider as a condition of reimbursement to a pharmacist;
19 provided that, no nonprofit medical service corporation may be required to pay for duplicative
20 services actually rendered by both a pharmacist and any other healthcare provider.

21 (b) The health plan shall include an adequate number of pharmacists in its network of
22 participating medical providers. The participation of pharmacies in the plan network's drug benefit
23 does not satisfy the requirement that plans include pharmacists in their networks of participating
24 medical providers.

25 (c) The healthcare benefits outlined in this section shall apply only to services delivered
26 within the health insurer's provider network; provided that, all health insurers shall be required to
27 provide coverage for those benefits mandated by this section outside of the health insurer's provider
28 network where it can be established that the required services are not available from a provider in
29 the health insurer's network.

30 SECTION 4. Chapter 27-20 of the General Laws entitled "Nonprofit Medical Service
31 Corporations" is hereby amended by adding thereto the following section:

32 **27-20-84. Coverage for pharmacists' services.**

33 (a) Every group health insurance contract, or every group hospital or medical expense
34 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by

1 any health insurance carrier, on or after January 1, 2027, shall provide coverage for the services
2 within the lawful scope of practice of pharmacists pursuant to § 5-19.1-2 if the plan would have
3 provided coverage if the service had been performed by a physician, advanced practice nurse, or
4 physician assistant. No nonprofit medical service corporation may require supervision, signature,
5 or referral by any other healthcare provider as a condition of reimbursement to a pharmacist;
6 provided that, no nonprofit medical service corporation may be required to pay for duplicative
7 services actually rendered by both a pharmacist and any other healthcare provider.

8 (b) The health plan shall include an adequate number of pharmacists in its network of
9 participating medical providers. The participation of pharmacies in the plan network's drug benefit
10 does not satisfy the requirement that plans include pharmacists in their networks of participating
11 medical providers.

12 (c) The healthcare benefits outlined in this section shall apply only to services delivered
13 within the health insurer's provider network; provided that, all health insurers shall be required to
14 provide coverage for those benefits mandated by this section outside of the health insurer's provider
15 network where it can be established that the required services are not available from a provider in
16 the health insurer's network.

17 SECTION 5. Chapter 27-41 of the General Laws entitled "Health Maintenance
18 Organizations" is hereby amended by adding thereto the following section:

19 **27-41-101. Coverage for pharmacists' services.**

20 (a) Every group health insurance contract, or every group hospital or medical expense
21 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by
22 any health insurance carrier, on or after January 1, 2027, shall provide coverage for the services
23 within the lawful scope of practice of pharmacists pursuant to § 5-19.1-2 if the plan would have
24 provided coverage if the service had been performed by a physician, advanced practice nurse, or
25 physician assistant. No nonprofit medical service corporation may require supervision, signature,
26 or referral by any other healthcare provider as a condition of reimbursement to a pharmacist;
27 provided that, no nonprofit medical service corporation may be required to pay for duplicative
28 services actually rendered by both a pharmacist and any other healthcare provider.

29 (b) The health plan shall include an adequate number of pharmacists in its network of
30 participating medical providers. The participation of pharmacies in the plan network's drug benefit
31 does not satisfy the requirement that plans include pharmacists in their networks of participating
32 medical providers.

33 (c) The healthcare benefits outlined in this section shall apply only to services delivered
34 within the health insurer's provider network; provided that, all health insurers shall be required to

1 [provide coverage for those benefits mandated by this section outside of the health insurer's provider](#)
2 [network where it can be established that the required services are not available from a provider in](#)
3 [the health insurer's network.](#)

4 SECTION 6. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
A N A C T
RELATING TO BUSINESSES AND PROFESSIONS -- PHARMACIES

- 1 This act would add new sections which set forth conditions for pharmacists to prescribe
2 tobacco cessation drug therapies, including education approved by the state board of pharmacy.
3 The cessation therapies pharmacists' services for cessation therapies would be covered by all health
4 insurance carriers on or after January 1, 2027.
5 This act would take effect upon passage.

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