

American Lung Association ‘State of Tobacco Control’ report releases Rhode Island grades

PROVIDENCE – On January 24, the American Lung Association released the 22nd annual “State of Tobacco Control” report, which finds that Rhode Island received one F, one D, one C, and two B grades for efforts to prevent and reduce tobacco use.

This year’s report noted the need for Rhode Island policymakers to focus on increasing and protecting funding for the tobacco prevention and control program, establishing tax parity for all tobacco products, closing loopholes in smokefree air policies to include casinos, and ensuring that all FDA-approved cessation medication is accessible to those who need it.

Rhode Island grades

The “State of Tobacco Control” report grades states and the District of Columbia in five areas that have been proven to prevent and reduce tobacco use and save lives. In the 2024 report, Rhode Island received the following grades: (Figure 1)

1. Funding for State Tobacco Prevention Programs – Grade F
2. Strength of Smokefree Workplace Laws – Grade C
3. Level of State Tobacco Taxes – Grade B
4. Coverage and Access to Services to Quit Tobacco – Grade B
5. Ending the Sale of All Flavored Tobacco Products – Grade D

Legislative advocacy plans

“Tobacco use is the leading cause of preventable death in Rhode Island and across the country, and takes the lives of 1,780 Rhode Islanders each year. The tobacco industry will do anything to protect their profits at the expense of Rhode Island lives, so we must push forward in our efforts to prevent and reduce tobacco use,” said **DANIEL FITZGERALD**, director of advocacy at the American Lung Association in Rhode Island. (Figure 2).

Rhode Island Facts	
Healthcare Costs Due to Smoking:	\$639,604,224
Adult Smoking Rate:	11.80%
High School Smoking Rate:	3.00%
High School Tobacco Use Rate:	17.50%
Middle School Smoking Rate:	1.60%
Smoking Attributable Deaths per Year:	1,780

Adult smoking data come from CDC’s 2022 Behavioral Risk Factor Surveillance System. High school smoking and tobacco use data come from the 2021 Youth Risk Behavior Surveillance System. Middle school smoking rate is taken from the 2019 Rhode Island Youth Risk Behavior Survey.

Health impact information is taken from the Smoking Attributable Mortality, Morbidity and Economic Costs (SAMMEC) software. Smoking attributable deaths reflect average annual estimates for the period 2005-2009 and are calculated for persons aged 35 years and older. Smoking-attributable healthcare expenditures are based on 2004 smoking-attributable fractions and 2009 personal healthcare expenditure data. Deaths and expenditures should not be compared by state.

He added, “In 2023, we had a lot of ‘almost’ wins for tobacco control, and this year, we aim to push some of those initiatives over the finish line. We are urging the state legislature to adequately fund tobacco control efforts at or above the CDC-recommended level and pass legislation to ensure all Rhode Islanders are protected from a lifetime of tobacco dependence and disease.”

The report stated that, despite receiving \$188.9M from tobacco taxes, Rhode Island only funds tobacco control efforts at 14.2% of the level recommended by the Centers for Disease Control and Prevention (CDC). In the report, The Lung Association urges Governor McKee and the legislature to increase funding for this critical program.

In the 2024 session, the Lung Association also plans to revisit the successful hearings on legislation that would enable pharmacists to prescribe FDA-approved smoking cessation therapies. The pharmacist’s prescribing authority was passed in the House of Representatives but was never moved forward for a vote in the Senate. Additionally, the Lung Association plans to pursue a vote on legislation that would close a nearly 20-year-old loophole and make casinos smokefree.

“Closing the loophole in our smokefree air law to eliminate smoking in all public places and workplaces, including casinos, would protect workers across the state from deadly secondhand smoke,” Fitzgerald said. ❖

Rhode Island Report Card 2024	
Tobacco Prevention and Cessation Funding F	Tobacco Taxes B
FY2024 State Funding for Tobacco Control Programs: \$429,205	Cigarette Tax per pack of 20: \$4.25
FY2024 Federal Funding for State Tobacco Control Programs: \$1,383,858*	Tax on little cigars: Equalized: Yes; Weight-Based: No
FY2024 Total Funding for State Tobacco Control Programs: \$1,813,063	Tax on large cigars: Equalized: No; Weight-Based: No
CDC Best Practices State Spending Recommendation: \$12,800,000	Tax on smokeless tobacco: Equalized: No; Weight-Based: Yes
Percentage of CDC Recommended Level: 14.2%	Tax on pipe/RYO tobacco: Equalized: Yes; Weight-Based: No
State Tobacco-Related Revenue: \$188,900,000	Tax on E-Cigarettes: Equalized: N/A; Weight-Based: N/A
<small>*Includes tobacco prevention and cessation funding provided to states from the Centers for Disease Control and Prevention.</small>	
Smokefree Air C	Access to Cessation Services B
Overview of State Smoking Restrictions:	Overview of State Cessation Coverage:
Government Workplaces: Prohibited	State Medicaid Program:
Private Workplaces: Prohibited	Medications: All 7 medications are covered
Schools: Prohibited	Counseling: All 3 types of counseling are covered
Childcare Facilities: Prohibited	Barriers to Coverage: Some barriers exist to access care
Restaurants: Prohibited	Medicaid Expansion: Yes
Bars: Prohibited (allowed in smoking bars)	State Employee Health Plan(s):
Casinos/Gaming Establishments: Allowed in designated areas	Medications: All 7 medications are covered
Retail Stores: Prohibited	Counseling: All 3 types of counseling are covered
E-Cigarettes Included: Yes	Barriers to Coverage: No barriers exist to access care
Preemption/Local Opt-Out: Yes	State Quitline:
Citation: R.I. GEN. LAWS §§ 23-20.10-1 et seq. (2018). Thumbs down for Rhode Island for failing to pass legislation to close the loophole for casinos in its smokefree air law.	Investment Per Smoker: \$1.91; the median investment per smoker is \$1.93
	Other Cessation Provisions:
	Private Insurance Mandate: Partial mandate
	Tobacco Surcharge: Prohibits tobacco surcharges
	Flavored Tobacco Products D
	Restrictions on Flavored Tobacco Products: All flavored e-cigarettes prohibited in all locations

CNE, AMS create EPIC information systems opportunity for medical students

PROVIDENCE – Care New England (CNE) has announced that it is partnering with The Warren Alpert Medical School of Brown University to offer medical students the opportunity to serve as an Epic Physician Builder/Informaticist. The medical students will work at CNE under the supervision of a Brown faculty member and receive a stipend.

“At Care New England, we are pleased to partner with Brown and the outstanding medical students at The Warren Alpert Medical School, to provide them with a truly unique opportunity to learn the digital tools of the trade while still in school, putting them ahead of the game upon graduation,” said **TOM GREGORIO**, Chief Information Officer, Care New England Health System. He added, “As part of the Physician Builder team, medical students will be planning, designing, and building content for medical or surgical specialties within CNE’s Epic electronic medical record (EMR) system, which is a hands-on opportunity not ordinarily available to medical students.”

In this role, medical students will:

- Gain experience and proficiency as physician builders in Epic EMR, the EMR vendor with the largest share of the acute care hospital market.
- Learn how an EMR is built and learn how to use documentation tools to create items such as SmartTexts, SmartLists, and Smart Phrases and ordering tools that are used to create order sets and panels.
- Collaborate with users, clinician champions, and department executive leadership to gain an understanding of current state workflow and help inform future workflows that will provide opportunities for streamlining and promoting efficiencies.

This year-long program will be offered to Brown medical students from April 29, 2024, through April 25, 2025.

“We are excited to partner with Care New England to offer this unique educational opportunity to our medical students,” said **STEVEN ROUGAS, MD, MS, FACEP**, Assistant Dean of Medical Education and Director of the Clinical Curriculum at The Warren Alpert Medical School. “As future clinical providers, access to and experience with developing EMR content is critical in today’s digital technology landscape. This experience will complement the strong curricular foundation students are provided at The Warren Alpert Medical School through real-world immersion in the design and implementation process.”

Rising fourth-year medical students at Brown who are interested in bioinformatics and electronic health records are encouraged to apply. Care New England anticipates this will be a full-time (40 hours/week) position for the length of the program. The deadline for submission is February 21, 2024. ❖

Rhode Island joins Compact for Interstate Nurse Licensure

PROVIDENCE – Governor **DAN MCKEE** and the Rhode Island Department of Health (RIDOH) announced on Jan. 11th that Rhode Island has joined the national Nurse Licensure Compact, allowing nurses in 41 states who hold a Multi-State License to come to Rhode Island and work. Rhode Island nurses with Multi-State Licenses will also be able to work in any of these other states.

This change affects registered nurses (RNs) and licensed practical nurses (LPNs) who are currently licensed in Rhode Island or who are applying for initial licensure. Within these license categories, three groups of people are impacted.

- Anyone who is currently licensed in Rhode Island and who has Rhode Island as their primary state of residency will be applying for a Multi-State License when renewing next (March 1, 2024, or March 1, 2025).
- Anyone who is currently licensed in Rhode Island and whose primary state of residency is a Compact State will receive a Multi-State License when renewing, and have their single-state Rhode Island license changed to inactive.
- Anyone who is currently licensed in Rhode Island and whose primary state of residency is not a Compact State will continue to work in Rhode Island with a single-state license. Their license status will not change, and they will renew their license by their scheduled renewal date.

“Any nurse who practices in Rhode Island under a Multi-State License will be held to the same professional standards as a nurse with a single-state license. Our standards for quality will remain as high as ever,” said Interim Director **UTPALA BANDY, MD, MPH**. “Our goal in joining this compact is reducing the time that qualified nurses spend filling out multiple licensing applications and making these workers available to patients for care as soon as possible in Rhode Island.”

Licensed nurses can find more information, quick reference charts, and updated forms on RIDOH’s Nurse Licensure Compact web page. Anyone looking to verify any type of RN or LPN license can visit the Nursys website. ❖

Application period now open for Blue Cross & Blue Shield of Rhode Island's LGBTQ Safe Zone Program

Applications are due by Thursday, Feb. 15th, at 5 p.m.

PROVIDENCE – Blue Cross & Blue Shield of Rhode Island (BCBSRI) is now accepting applications for its newest cohort of LGBTQ Safe Zone facilities. Healthcare facilities designated as Safe Zones will join more than 100 sites statewide that have demonstrated they are providing safe, affirming, and inclusive care to Rhode Island's LGBTQ community.

Applications are due by Thursday, Feb. 15th, at 5 p.m.

"Feeling respected and safe while seeking care is a critical part of achieving one's own health and well-being, particularly the LGBTQ community, which has historically experienced mistreatment and discrimination in healthcare settings," said **SCOTT GOWRIE**, program lead for Safe Zone. "The Safe Zone Program helps

direct Rhode Islanders to safe, affirming, and inclusive settings when they are seeking care."

BCBSRI LGBTQ Safe Zones are certified based on a variety of factors. Certified facilities must train staff members in LGBTQ cultural competency, be committed to protecting staff and patients from discrimination, provide gender-neutral bathrooms, utilize inclusive forms and intake procedures, and display a commitment to working with the LGBTQ community.

Since launching its LGBTQ Safe Zone program in 2015, BCBSRI has certified 117 Safe Zone locations in more than 25 cities and towns across Rhode Island. These providers span a range of specialties that include primary care, dental and mental

health practices, pediatric care, assisted living facilities for older adults, and more. Visit bcbstri.com/safezones to view the complete list of Safe Zone facilities.

Facilities that meet certification requirements will be given a customized Safe Zone plaque and window cling so that visiting patients recognize it as a place that offers safe and affirming care to the LGBTQ community. Certified Safe Zones will also be added to a list that members can use to seek inclusive care settings. There is no cost to apply or obtain certification.

To learn more or apply for certification, visit bcbstri.com/providers/safezone-program. BCBSRI will notify newly certified facilities by March. ❖