



Study Shows VA Significantly Increased Prescriptions for Smoking Cessation Medications among Veterans

CITATION:

Smith, M, Chen S, Siroka A, and Hamlett-Berry K. Using Policy to Increase Prescribing of Smoking Cessation Medications in the VA Health Care System. *Tobacco Control* September 24, 2010, e-pub ahead of print.

FINDINGS:

- VA policy initiatives instituted since 2002 have greatly increased prescriptions for smoking cessation medications among Veterans, while decreasing costs.
- The number of Veterans filling a prescription for nicotine replacement therapy (NRT) increased 63% from FY04 through FY08 after controlling for modest growth in the VA patient population. Thirty-day-equivalent NRT prescriptions rose nearly 50% over the same period.
- Bupropion prescribing also rose sharply. Adjusting for enrollment growth, the four-year growth rate among Veterans also prescribed a NRT was 61% greater than the 35% growth rate among all Veterans receiving bupropion prescriptions.
- While prescriptions for NRT and bupropion rose, spending per treated patient fell by 39% for bupropion and by 24% across all NRT formats (e.g., patch, gum). This is partly because median contract prices for NRT and bupropion on the U.S. Federal Supply Schedule decreased. VA pharmacies may also have switched to less expensive products, e.g., generic brands.

BACKGROUND:

For many years, smoking cessation treatment rates in VA were low. For example, a review of cessation therapy in the VA healthcare system from 1998 to 2002 estimated that only 6 to 7% of VA smokers were being treated with nicotine replacement therapy (NRT) or sustained-release bupropion. Since 2002, VA has implemented a range of policies and programs to increase evidence-based treatment for smoking, including use of medications for smoking cessation (i.e., NRT and bupropion). These policies include eliminating the requirement that Veterans must attend a smoking cessation clinic in order to receive a prescription, eliminating co-pays for smoking cessation counseling, expanding provider training, and adopting more comprehensive performance measures to track quality of cessation services. This study examined the change in rates of dispensing cessation-related medications to Veterans in the VA healthcare system to assess the impact of these policy changes. Investigators analyzed data for all VA inpatient and outpatient prescriptions for NRT and bupropion filled from FY04 through FY08 at all VA facilities. They also assessed VA spending for these medications.

LIMITATIONS:

- VA patients also may have received smoking cessation assistance from outside sources.
- These study results do not indicate whether increased prescribing rates led to increased quit rates.

AUTHOR/FUNDING INFORMATION:

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