TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE
PUBLIC HEALTH COMMITTEE
Friday, March 6, 2020

HB 5020, An Act Implementing The Governor's Budget Recommendations Regarding Public Health

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **HB 5020, An Act Implementing The Governor's Budget Recommendations Regarding Public Health**. CHA supports strong tobacco-control measures, whether it be through municipal ordinances, workplace policies, or state and federal laws. As such, CHA supports the goal of HB 5020 and respectfully requests that the bill be amended to address two important provisions.

Before commenting on this bill, it is important to point out that Connecticut hospitals and health systems provide high quality care for everyone, regardless of their ability to pay, and work to improve the health of those who live in our communities. Supporting Connecticut's hospitals strengthens our healthcare system and our economy.

In 2019, under the leadership of this Committee, the state of Connecticut passed a law that raised the legal age to buy tobacco products from 18 to 21. CHA and its member hospitals were supportive of that proposal and commend the General Assembly and the Governor for their leadership on that issue. Similarly, CHA looks forward to working with state policymakers to ensure that any proposed tobacco-control bill achieves the goals of improving the health and well-being of Connecticut residents, while ensuring that there are no unintended consequences to healthcare providers or patients.

Related to tobacco control, HB 5020 would: ban flavoring, other than tobacco flavor in vaping products; limit nicotine levels in vape products; increase compliance; increase penalties for non-compliance; and require the dangers of vaping to be included in the K-12 curriculum.

We know that the best way to reduce health-associated harm caused by smoking is to abstain from smoking altogether or, at a minimum, delay the start of smoking. We also know that added flavoring in tobacco products entices more users and makes an otherwise objectionable taste more palatable and enjoyable[1]. Flavored tobacco products can appeal to youths and

[1] U.S. Food and Drug Administration. *Menthol and Other Flavors in Tobacco Products* (https://www.fda.gov/tobacco-products/products-ingredients-components/menthol-and-other-flavors-tobacco-products#reference) accessed 2-16-20.

young adults and influence initiation and establishment of tobacco-use patterns[2]. In order for the impact of the proposed bill to be most effective, we respectfully ask that menthol tobacco cigarettes be included as part of this important tobacco-control proposal.

Lastly, CHA respectfully requests that you consider amending the definitions of *electronic nicotine delivery system* and *electronic cigarette liquid* to avoid interference with the use of nebulizers and other medicines and therapies.

Section 21a-415 of the General Statutes contains a carve-out for medical devices and therapeutic products. We request that language be included in any proposed legislation that defines banned devices or substances. The suggested language is below:

"*Electronic nicotine delivery system*" *does not include a medicinal or therapeutic product that is (A) used by a licensed healthcare provider to treat a patient in a healthcare setting, (B) used by a patient, as prescribed or directed by a licensed healthcare provider in any setting, or (C) any drug or device, as defined in the federal Food, Drug and Cosmetic Act, 21 USC 321, as amended from time to time, any combination product, as described in said Act, 21 USC 353(g), as amended from time to time, or any biological product, as described in 42 USC 262, as amended from time to time, and 21 CFR 600.3, as amended from time to time, authorized for sale by the United States Food and Drug Administration;"*

"*Electronic cigarette liquid*" *does not include a medicinal or therapeutic product that is (A) used by a licensed healthcare provider to treat a patient in a healthcare setting, (B) used by a patient, as prescribed or directed by a licensed healthcare provider in any setting, or (C) any drug or device, as defined in the federal Food, Drug and Cosmetic Act, 21 USC 321, as amended from time to time, any combination product, as described in said Act, 21 USC 353(g), as amended from time to time, or any biological product, as described in 42 USC 262, as amended from time to time, and 21 CFR 600.3, as amended from time to time, authorized for sale by the United States Food and Drug Administration;"*

Thank you for your consideration of our position. For additional information, contact CHA Government Relations at (203) 294-7310.

[2] Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report, Flavored Tobacco Product Use Among Middle and High School Students — United States, 2014–2018; *Weekly* / October 4, 2019 / 68(39);839–844 (https://www.cdc.gov/mmwr/volumes/68/wr/mm6839a2.htm) accessed 2-16-20