COMMENTARY: CVS tobacco decision – applause, then a pause

BY JON O. EBBERT, M.D.

CVS Pharmacy, the nation’s second largest pharmacy and 18th largest company in the world, threw down the gauntlet to other pharmacy chains and vowed to stop selling tobacco products by Oct. 1, 2014.

As a retail pharmacy division of CVS Caremark, CVS Pharmacy is a drug store chain, a pharmacy benefit manager, and a leading retail health care provider. They have this “MinuteClinic” retail health clinics and can provide assistance with blood pressure and blood sugar management. In this sense, eliminating the sale of cigarettes is akin to removing cassettes from the gift shops of hospitals and medical clinics. The major difference is that hospitals and clinics carried cassettes as convenience items; for a company such as CVS Pharmacy, tobacco provided more than $1.5 billion in annual sales. This is no small gamble. But it’s one that will hopefully pay off.

First of all, it’s the right thing to do in the interest of public health; 480,000 Americans still die of tobacco-related diseases annually. Second, the media attention and accolades received from President Obama, the American Medical Association, and the Campaign for Tobacco-Free Kids will, however short lived, bring recognition to the brand. CVS Pharmacy will now be identified as being concerned not only about patients who fill their prescriptions there, but also about the health and well-being of the communities in which the pharmacies operate. If another pharmacy chain follows suit, great, but CVS was first.

This attention will also garner attention to the other health care services that the retail chain provides, and it will increase the likelihood that hospitals, clinics, and ACOS will partner with the company. Retail pharmacies will undoubtedly play a significant player in the delivery of health care, and medical organizations should be partnering with these companies.

Unlike large medical institutions, which may be slow to action, a company like CVS could be more nimble and able to implement models of care in many of its more than 7,600 stores. This could have a true population impact – arguably, more of an impact than training more physicians to provide care using traditional models. CVS’s announcement demonstrates that they are a willing and able partner in improving public health and engaging in health care delivery.

Dr. Ebbert is professor of medicine at the Mayo Clinic, Rochester, Minn. He disclosed financial relationships with Pfizer and GlaxoSmithKline, manufacturers of tobacco-dependence treatments. Scan the QR code for more commentaries at familypracticenews.com.

Dr. Ebbert: CVS made the right move

BY DEBRA PATT, M.D.

For decades, it has been counterintuitive that pharmacies that deliver health promotion products and are Medicare and Medicaid providers also distribute tobacco products to their patients. That an average patient can get antihypertensive medications, cholesterol-lowering drugs, and a pack of cigarettes – all from the same place – is misaligned.

So it was the right move for Larry J. Merlo, president and CEO of CVS/Caremark, to announce that CVS pharmacy will stop selling tobacco products in their stores this October. Cigarettes, cigars, and chewing tobacco will all be phased out. This will occur in combination with efforts from CVS for a tobacco cessation program to help to promote wellness among their customers.

This is certainly in the best interest of their customers’ health, but may come with some complications for the company. Today, 19% of Americans smoke as compared with more than 40% in the mid-1960s, according to data from the Centers for Disease Control and Prevention. Despite the tremendous reduction in smoking prevalence, tobacco-co sales still comprise an important source of revenue for pharmacies. Discontinuing their sales may come with some economic burden.

As more pharmacies, and particularly CVS pharmacy, move to a model of facilitating wellness by offering retail health clinics, labs, and vaccinations, in addition to more traditional pharmaceutical services, it makes sense that they will make choices in alignment with patient-centered wellness. It is likely that other pharmacies will also follow CVS’s lead. To move in that direction of promoting health better would discredit the other service offerings to promote care delivery.

While this change today is continued on page 59

Dr. Ebbert and Dr. Patt had no disclosures. Scan the code for more blogs at familypracticenews.com.