

# 2018 New York State YMCA Youth And Government

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Committee Assignment: Senate 2 Bill #: S-11

**Sponsors:** Abigail Bustin, Cameron Conger, Emily Neuner

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## **An Act To**

To amend section § 3306 of New York State Public Health Law to re-classify nicotine as a prescription drug.

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The People of the State of New York, represented in the Senate and Assembly do enact as follows:

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## **Purpose**

The purpose of this bill is to enhance the health of New Yorkers and minimize economic implications of nicotine abuse in New York State by reclassifying nicotine as a prescription drug.

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#### **Summary of Provisions**

- § 3306. Schedules of controlled substances. There are hereby established five schedules of controlled substances, to be known as schedules I, II, III, IV and V respectively. Such schedules shall consist of the following substances by whatever name or chemical designation known:
- Schedule I. (a) Schedule I shall consist of the drugs and other substances, by whatever official name, common or usual name, chemical name, or brand name designated, listed in this section.
- 23 (b) Opiates. Unless specifically excepted or unless listed in another
  24 schedule, any of the following opiates, including their isomers, esters,
  25 ethers, salts, and salts of isomers, esters, and ethers, whenever the
  26 existence of such isomers, esters, ethers and salts is possible within
  27 the specific chemical designation (for purposes of 3-methylfentanyl
  28 only, the term isomer includes the optical and geometric isomers):
- 29 (1) Acetyl-alpha-methylfentanyl (N-{1-(-methyl-2-phenethyl})
- 30 (37) MPPP (1-methyl -4-phenyl -4-propionoxypiperidine).
- 31 <u>(38) Nicotine</u>
- 32 (39) Noracymethadol
- 33 [list continues to 55]

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#### Justification

36 The use of nicotine has proven to disrupt the prosperity, lives and the economic 37 well-being of New Yorkers. 16,400 New York children lost a parent due to tobacco 38 use, and 389,000 children alive today will ultimately die from smoking if the pattern 39 of current smoking levels continues, according to the New York State operated 40 Smoker's Quit Line in 2016. In a case documented by the Center For Disease 41 Control and Prevention, Amanda, who started smoking in the fifth grade, gave birth 42 to a premature baby girl who spent her first weeks in life in the neonatal intensive 43 care unit of the local hospital, only 3 pounds. Amanda's child, now 7 years old, has



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44 developed serious health conditions and takes four medications regularly. Cases 45 similar to this increase costs to New Yorkers through insurance fees, tax money, 46 Medicaid expenses and hospital bills. Residents pay \$903 per household (\$5.9 47 billion total) to cover smoking-related government costs, while the annual 48 healthcare expenditures in the state caused by nicotine use amount to \$8.17 billion 49 [New York State Smoker's Quit Line]. With the passage of the proposed bill, these 50 costs to the individual and to the state can be decreased dramatically. By re-51 classifying nicotine as a prescription drug, the harmful substance will be no longer a 52 consumer product but a medical product, decreasing the number of smokers 53 harming themselves and others in New York State. This bill is designed to be a 54 long-term state project, as the bill sponsors are aware that thousands of individuals 55 are currently smokers and would be negatively impacted if this bill were to go into effect immediately. Rather, the passage of this bill would ensure that current 56 57 smokers are being placed under supervised medical care in order to wean them off 58 of a proven harmful substance. 59

### **Fiscal Implications**

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64 65 The fiscal implications of this bill include an immediate decrease in New York State's tax revenue from tobacco, but this is offset by the decrease in Medicaid, insurance and hospital costs for New Yorkers.

#### **Effective Date**

This bill will go into effect one year after its passage.