



January 12, 2010

SENT TO: Senators Reid, Dodd, Baucus and Harkin
Representatives Pelosi, George Miller, Rangel, Hoyer and Waxman

As negotiations continue about the final contents of health reform legislation, we urge you to include an important wellness and prevention component that would require states to cover comprehensive tobacco cessation benefits for all Medicaid recipients. The House-passed bill requires Medicaid coverage of cessation services as well as coverage for other prevention services recommended by the U.S. Preventive Services Task Force. The Senate-passed bill only requires Medicaid to cover tobacco cessation services for pregnant women.

Comprehensive cessation benefits are among the most cost-effective and efficacious preventive services available today. Tobacco cessation interventions earn an “A” grade from the U.S. Preventive Services Task Force, which recognizes that smoking cessation decreases the risk for heart disease, stroke and lung disease. These diseases rank among the leading causes of death and chronic disease in the United States. The Institute of Medicine and the U.S. Public Health Service also strongly endorse comprehensive cessation benefits.

Over 70 percent of people who currently use tobacco products want to quit, but they often must make multiple quit attempts before they successfully break their addiction to nicotine. Use of cessation drugs (over-the-counter or prescription drugs) and counseling can triple or quadruple cessation rates. The Medicaid population has the greatest need for access to these services. According to the National Center for Health Statistics, 33 percent of adult Medicaid recipients smoke, compared to 20 percent of the general population. Currently, few states provide the full range of services needed to help Medicaid smokers quit and some states provide no assistance at all. Not helping these smokers quit is extremely costly to taxpayer-funded Medicaid programs – tobacco-related healthcare costs for Medicaid programs averaged \$607 million per state in 2004.

A recent study from Massachusetts confirms the efficacy of providing comprehensive cessation benefits to all Medicaid recipients. Smoking rates for beneficiaries in the Massachusetts Medicaid program (MassHealth) have dropped 26% since the state implemented its comprehensive tobacco cessation benefit in July 2006. This represents a total of 33,000 fewer smokers. Utilization of other costly health care services also declined, including fewer hospitalizations for heart attacks, fewer emergency room visits for asthma attacks and a drop in claims for adverse maternal health complications. Massachusetts has demonstrated how lives and health care dollars can be saved when comprehensive cessation benefits are provided to the entire Medicaid population.

Emphasizing wellness and prevention in healthcare reform will ultimately reduce disease prevalence and the tremendous costs associated with chronic disease. Including in the final health care reform bill a requirement that states cover cessation services for all Medicaid recipients will ensure that people in the greatest need but who can least afford these services will have access them. The entire Medicaid population should have access to these life-saving benefits.

Sincerely,

American Cancer Society Cancer Action Network
American Heart Association
American Lung Association
Campaign for Tobacco-Free Kids
American Academy of Family Physicians
American Academy of Pediatrics
American Association for Respiratory Care
American College of Chest Physicians
American College of Preventive Medicine
American Dental Hygienists Association
American Psychological Association
American Public Health Association
American Society of Addiction Medicine
American Society of Clinical Oncology
American Thoracic Society
Association for the Treatment of Tobacco Use and Dependence (ATTUD)
Association of Pediatric Hematology/Oncology Nurses (APHON)
Association of Reproductive Health Professionals
Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN)
Lung Cancer Alliance
National Association of County and City Health Officials (NACCHO)
National Hispanic Medical Association
National Patient Advocate Foundation
National Research Center for Women & Families/Cancer Prevention
& Treatment Fund
Oncology Nursing Society
Partnership for Prevention
Society for Public Health Education
Trust for America's Health
United Methodist Church - General Board of Church and Society