



July 30, 2014

Mike Kreidler
Washington State Insurance Commissioner
PO Box 40256
Olympia, WA 98504-0256

Re: Affordable Care Act Tobacco Cessation Coverage

Dear Insurance Commissioner,

The undersigned organizations from Washington State are writing to urge you to take immediate action regarding tobacco cessation:

To provide guidance to insurers and health plans to clarify what tobacco cessation services must be covered in order to comply with the Affordable Care Act.

The action we are requesting does not require lengthy rulemaking or new resources, but will make great progress toward accomplishing a specific recommendation in the Surgeon General's report. This action would significantly increase the number of people able to gain access to the resources and assistance needed to quit using tobacco products.

On page 875, the 2014 Surgeon General's Report says the following action related to cessation "should be implemented":

Fulfilling the opportunity of the Affordable Care Act to provide access to barrier-free proven tobacco use cessation treatment including counseling and medication to all smokers, especially those with significant medical and physical comorbidities.

The Affordable Care Act (ACA) requires that non-grandfathered individual and group plans cover tobacco cessation services with no cost-sharing, as recommended by the U.S. Preventive Services Task Force (USPSTF) with an A rating. Earlier this year, the Obama Administration issued guidelines on tobacco cessation benefits available through the Affordable Care Act (ACA). This important announcement from the Departments implementing the ACA (Health and Human Services, Labor and Treasury) clarifies what treatments insurance plans should cover for quitting smoking as part of their preventive services benefit. This guidance was given to ensure that employers and insurance plans are doing everything they can to get tobacco users the help they need to quit.

The guidance states plans would be in compliance with the preventative service requirements if they offered the following comprehensive benefit without cost sharing:

- Screening for tobacco use.
- A minimum of two tobacco cessation attempts per year.
- Four tobacco cessation counseling sessions of at least 10 minutes each (including telephone counseling, group counseling and individual counseling) without prior authorization.
- All Food and Drug Administration (FDA)-approved tobacco cessation medications (including both prescription and over-the-counter medications) for a 90-day treatment regimen when prescribed by a health care provider without prior authorization.

However, there is evidence that insurers are not complying with it, and the U.S. Department of Health and Human Services has not provided guidance to insurers and plans to clarify which tobacco cessation services must be covered in order to comply with the ACA. The Department *has* provided such clarification for other preventive services, such as women's preventive health care, but not for tobacco cessation.

The full USPSTF recommendation and supporting clinical documents clearly indicate that both counseling and medications are effective and that a combination of counseling and medications "is more effective at increasing cessation rates than either component alone." The USPSTF recommendation references the United States Public Health Service Clinical Practice Guideline, *Treating Tobacco Use and Dependence: A 2008 Update*, as the source for a detailed description of effective evidence-based tobacco dependence treatments. Without further guidance from the Department, group plans and health insurance issuers have had to decide for themselves how to translate the USPSTF clinical recommendation for tobacco cessation services into a covered benefit.

The Campaign for Tobacco Free Kids recently commissioned researchers at Georgetown University Health Policy Institute to examine insurance contracts to assess compliance with the smoking cessation provisions of the Affordable Care Act. The study found that contracts often contained confusing and conflicting language that makes it impossible to determine which, if any, tobacco cessation services are covered. When contracts did clearly indicate that tobacco cessation services were covered, there were often substantial gaps in coverage. Only four of 39 plans clearly stated they covered individual, group and phone counseling, as well as both prescription and over-the-counter medications (OTC), for tobacco cessation. Many policies excluded certain

types of counseling and provided no coverage of prescription and OTC medications. Some plans imposed cost-sharing requirements for the tobacco cessation services they covered.

Therefore **we urge you to provide guidance to insurers and plans clarifying that “tobacco cessation interventions” include all types of counseling and FDA-approved medications and that these interventions will be covered whether or not they are delivered during an office visit.** Such guidance will increase access to comprehensive tobacco cessation services for the nearly 40 million Americans who suffer from tobacco dependence.

Tobacco use is still a problem nationwide as well as in Washington State. Smoking continues to be a leading cause of preventable death and disease, killing 76,000 Washingtonians each year. Seventeen percent of Washington adults (892,000) are current smokers while 25 percent of the state’s 25 to 34 year-olds smoke – the highest smoking rate of any age group in our state. (*Jan 2014, WA DOH 340-149 Tobacco Prevention & Control Program*)

Despite the progress that has been made, there is still more to be done. Improving access to evidence-based tobacco cessation services, as described above, is an action you can take quickly that will help tobacco users quit and reduce the health and economic toll of tobacco-caused diseases.

Sincerely,

Tobacco-free Alliance of Pierce County; Co-chairs, Heidi Henson, Terry Reid

Pierce County Community Connections; Social Service Program Specialist 3, Hae Man Song

Gay City Health Project; Executive Director, Fred Swanson

PenMet Parks; Executive Director, Terry Lee

Tobacco-free.org – The Foundation for a Smokefree America; Founder, Patrick Reynolds

Tacoma Housing Authority; Executive Director, Michael Mirra

Behavioral Health & Wellness; Executive Director, Helen Nilon

Puget Sound Neurology; Founder, Dr. Patrick Hogan

Smokefree Kids; Founder, Dr. Jeffrey Wigand

Representative Laurie Jinkins, 27th Legislative District

Thurston TOGETHER! Program Manager, Tina Johnson

APICAT for Healthy Communities; Director, Elaine Ishihara

Center for MultiCultural Health; Executive Director, Shelley Cooper-Ashford

University of Washington Tobacco Studies Program; Executive Director, Dr. Abigail Halperin