

Tobacco Cessation Coverage: What is Required?

The Patient Protection and Affordable Care Act (ACA) was passed in March 2010, and many of its major provisions have been implemented over the last four years, culminating in new insurance coverage available to many Americans starting January 1, 2014. How did the ACA change requirements for what plans should be covering to help smokers quit in 2014?

Insurance Type	Who?	Required coverage before ACA	Required coverage now
Medicare	Age 65+ or some disabled individuals	<ul style="list-style-type: none"> ■ 4 sessions of individual counseling ■ 4 prescription cessation medications ■ Up to 2 quit attempts per year 	<ul style="list-style-type: none"> ■ 4 sessions of individual counseling ■ 4 prescription cessation medications ■ Up to 2 quit attempts per year ■ No cost-sharing ■ Annual prevention visit
Traditional Medicaid	Low-income or disabled individuals, eligibility varies by state	No federal requirements, coverage varied by state	<p>For Pregnant Women:</p> <ul style="list-style-type: none"> ■ Individual, group and phone counseling ■ All tobacco cessation medications (prescription and OTC) ■ No cost-sharing <p>For all Medicaid Enrollees:</p> <ul style="list-style-type: none"> ■ All tobacco cessation medications (prescription and OTC) ■ Coverage of counseling varies by state/plan ■ Cost-sharing varies by state/plan
Medicaid Expansion	Low-income or disabled individuals, up to 138 percent of federal poverty level in states that expand Medicaid	Not applicable—Medicaid expansion did not exist prior to ACA	<ul style="list-style-type: none"> ■ Tobacco cessation treatment as a preventive service (see pg. 2) ■ No cost-sharing ■ At least 1 tobacco cessation medications
Individual Insurance Plans*	Individuals not buying insurance through an employer or part of a group, including through state health insurance marketplaces	No tobacco cessation requirements	<ul style="list-style-type: none"> ■ Tobacco cessation treatment as a preventive service (see pg. 2) ■ No cost-sharing ■ 1-3 tobacco cessation medications, depending on the benchmark plan
Small Group Plans*	Individuals buying insurance through their small employer (100 or less full-time employees) or another small group, including through state health insurance marketplaces	No tobacco cessation requirements	<ul style="list-style-type: none"> ■ Tobacco cessation treatment as a preventive service (see pg. 2) ■ No cost-sharing ■ 1-3 tobacco cessation medications, depending on the benchmark plan
Employer-Provided Plans (Large Group/Self-Insured)*	Employees receiving insurance coverage through their employer	No tobacco cessation requirements	<ul style="list-style-type: none"> ■ Tobacco cessation treatment as a preventive service (see pg. 2) ■ No cost-sharing

*Excluding plans that are “grandfathered” (those that were in operation before March 2010 and have not made significant changes) and do not have to meet ACA requirements.

Cost-sharing: money a patient must pay when receiving treatment/filling a prescription—copays, deductibles, coinsurance, etc.

OTC Medication: medication you can buy “over-the-counter” without a prescription

Benchmark plan: the plan each state has chosen to set the standard for other plans in the State Health Insurance Marketplace

Tobacco Cessation Treatment as a Preventive Service

The ACA requires many health insurance plans to cover all preventive services given an ‘A’ or ‘B’ rating by the U.S. Preventive Services Task Force (USPSTF). Tobacco cessation for adults has an ‘A’ rating from the USPSTF. However, the USPSTF rating and related recommendation was written for healthcare providers, not as a model for insurance coverage policy. As a result, there have been many questions since ACA implementation began in 2010 about what plans are required to cover for tobacco cessation. Evidence began to mount that most plans were not covering a true comprehensive cessation benefit.^{1,2,3} The American Lung Association and other public health organizations repeatedly asked for clarification and guidance from the agencies implementing the ACA.⁴

On May 2, 2014, the Departments of Health and Human Services, Labor and Treasury provided guidance on this topic. The departments issued a [FAQ document](#),⁵ translating the USPSTF recommendation into insurance coverage policy. The guidance stated that the Departments would consider the relevant health plans to be in compliance with the preventive service requirement for tobacco cessation if they cover, for example:

- Screening for tobacco use
- Individual, group or phone counseling (at least 10 minutes per session)
- All FDA-approved tobacco cessation medications (prescription and over-the-counter) when prescribed by a healthcare provider
- At least two quit attempts per year
- 4 sessions of counseling and 90 days of medication per quit attempt
- No prior authorization is required for treatment
- No cost-sharing is required

1. Georgetown University Health Policy Institute. Implementation of tobacco cessation coverage under the Affordable Care Act: Understanding how private health insurance policies cover tobacco cessation treatments. November 26, 2012. Available at: <http://tfk.org/coveragereport/>.
2. Centers for Disease Control and Prevention. Health Plan Implementation of U.S. Preventative Services Task Force A and B Recommendations—Colorado, 2010. *Morbidity and Mortality Weekly Report*. October 7, 2011; 60(39):1348-50.
3. Kolade, FM. Tennessee Health Plan Tobacco Cessation Coverage. *Public Health Nursing Journal*. January-February 2014;31:28-35.
4. Most recently, see letter sent February 19, 2014: <http://www.lung.org/get-involved/advocate/advocacy-documents/letter-sebelius-tobacco-cessation-benefit-02192014.pdf>
5. United States Department of Labor. FAQs about Affordable Care Act Implementation (Part XIX). May 2, 2014. Available at: <http://www.dol.gov/ebsa/faqs/faq-aca19.html>.