Fewer Americans would smoke if cessation treatments were covered: CDC

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Counseling and medication services aren't all included, and barriers to access exist, study shows.

(HealthDay)—More Americans would quit smoking if coverage for every type of smoking-cessation treatment was provided by all state Medicaid programs, and if states removed barriers to coverage, according to a federal government study.

Although states are making progress, few of them provide Medicaid coverage for all treatments to help people kick the habit, according to the U.S. Centers for Disease Control and Prevention.

The CDC researchers said Medicaid enrollees are more likely to smoke than people in the general population, and smoking-related diseases are a major factor in rising Medicaid costs.

Currently, seven states cover all approved smoking-cessation medications and counseling for all Medicaid recipients. Barriers to getting these treatments exist in all states, with the most common being limits on how long treatment is covered, how much is covered per year, prior authorization requirements and co-payments, the researchers said.

They found that between 2008 and 2014, 41 states made changes to the smoking-cessation treatments they covered for at least some plans or groups of people. Nineteen states added treatments to coverage without removing any from coverage. Meanwhile, eight states removed treatments from coverage without adding any new treatments. Fourteen states both added and removed coverage.

Over that period, 38 states changed barriers to getting smoking-cessation treatment for at least some plans or groups of people. Nine states removed barriers without adding any, 12 states added barriers without removing any and 17 states both removed and added barriers.

The study appears in the March 27 issue of the *Morbidity and Mortality Weekly Report*, which is published by the CDC.

"States can save lives and reduce costs by providing Medicaid coverage for all proven cessation treatments, removing barriers to accessing these treatments and promoting the expanded coverage," Dr. Tim McAfee, director of the CDC's Office on Smoking and Health, said in an agency news release.

"Reducing the number of smokers will save lives and reduce health care costs," he said.

And many people are interested in quitting, a study researcher said.

"There's evidence suggesting that smokers enrolled in Medicaid, like

other smokers, want to quit and will take advantage of covered cessation treatments to help them quit for good," study co-author Stephen Babb said in the news release.

Babb pointed to Massachusetts, which expanded its Medicaid coverage of smoking-cessation treatments in 2006.

"Massachusetts heavily promoted its new Medicaid cessation coverage to Medicaid enrollees and health care providers, and saw a drop in the smoking rate among Medicaid enrollees from 38 percent to 28 percent," Babb said.

"There was also an almost 50 percent drop in hospital admissions for heart attacks among those who used the benefit," he said. "It is important that all smokers who want help quitting—including smokers enrolled in Medicaid—have access to proven cessation treatments and services."

Smoking is the leading cause of preventable death in the United States, and kills nearly half a million Americans a year. More than 16 million Americans have smoking-related diseases, which cost $132 billion a year in direct health care expenses, according to the CDC.

More information: The American Cancer Society offers a guide to quitting smoking.

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