



Comprehensive Tobacco Cessation Programs

The American Heart Association's Position

Smoking costs the U.S. economy approximately \$300 billion each year, including \$133-176 billion for direct medical costs for adults and \$151 billion for lost productivity related to premature death.¹ To help achieve the tobacco endgame and save lives, the American Heart Association advocates for private and public health insurers to cover comprehensive cessation services for all current tobacco users including both counseling and pharmacotherapy without cost sharing or other barriers such as prior authorization or stepped therapy.

Having insurance coverage for tobacco cessation treatments is associated with increased quit attempts, use of cessation treatments, and successful tobacco cessation.² Tobacco cessation treatment remains highly cost-effective, even though it is very difficult for people to quit this deadly, addictive habit.⁶ A majority of smokers (68%) report that they want to quit entirely.⁷ There is a strong relationship between the length of time patients have in behavior counseling sessions, the amount of time they are able to spend with their health care providers and successful treatment outcomes.⁸

Impact:

The American Heart Association has advocated strongly for Medicaid expansion which is providing more low-income tobacco users access to care and preventive services, including tobacco cessation therapy. Since 2010, 35 states and Washington, DC have expanded Medicaid, providing new coverage to millions of Americans.

For more information and resources from the American Heart Association's policy research department on tobacco please visit: <https://www.heart.org/en/about-us/policy-research>.

Fast Facts:

1. The Massachusetts health care reform law mandated tobacco cessation coverage for the Massachusetts Medicaid population. Within the first two years of implementation, over 70,000 Massachusetts Medicaid recipients used the benefit, and the smoking rate declined from 38% to 28%.² Comprehensive coverage led to reduced hospitalizations for heart attacks and a net savings of \$10.5 million, or a \$3.07 return on investment for every dollar spent.^{3,4}
2. People who stop smoking greatly reduce their risk for disease and early death. Although the health benefits are greater for people who stop at earlier ages, there are benefits at any age.⁵

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4. Land T, Rigotti NA, Levy DE, Paskowsky M, Warner D, et al. A Longitudinal Study of Medicaid Coverage for Tobacco Dependence Treatments in Massachusetts and Associated Decreases in Hospitalizations for Cardiovascular Disease. *PLoS Med*. 2010; 7(12): e1000375.
5. Coffield, AB et al., Priorities among recommended clinical preventive services. *American Journal of Preventive Medicine*. July 2001. 21(1):1-9.
6. Javitz HS, Swan GE, Zbikowski SM, et al. Return on investment of different combinations of bupropion SR dose and behavioral treatment for smoking cessation in a health care setting: an employer's perspective. *Value Health*. Sep-Oct 2004;7(5):535-543.
7. Centers for Disease Control and Prevention. *Quitting Smoking Among Adults—United States, 2000–2015*. *Morbidity and Mortality Weekly Report* 2017;65(52):1457-64.
8. Treating tobacco use and dependence: 2008 update. In: U.S. Department of Health and Human Services PHS, ed. Rockville, MD; May 2008.