

# An Action Plan for Cessation



Everyone – including the federal government, state governments, employers and insurance companies – can and should be doing more to help smokers quit. The American Lung Association recommends the following:

- ➔ All healthcare plans should fully cover **comprehensive smoking cessation programs** for all of their members. This includes Medicare, state Medicaid programs, state employee health plans, TRICARE (health care for military families), and private employer-provided or individual health insurance plans. Comprehensive coverage consists of all components recommended by the Public Health Service clinical guidelines and the CDC, including all first line medications and group, individual and phone cessation counseling.
- ➔ Health care plans should provide smoking cessation coverage that is **free of barriers**. This includes eliminating co-pays, duration limits, prior authorization requirements, stepped care therapy, and other requirements for cessation medications and counseling. Eliminating these barriers to coverage is especially important for low-income populations, like Medicaid recipients, as barriers have been found to discourage these smokers from getting help.
- ➔ Healthcare plans should **widely publicize** their smoking cessation coverage. Plan members need to know that the coverage exists in order to access it. Insurance companies must publicize the coverage directly to members and their clinical providers and must educate providers about smoking cessation treatment.
- ➔ Health care plans should package smoking cessation benefits in a way that is easy for plan members to find information about the coverage and **understand how to use it**.
- ➔ Public and private health care plans should **track and report** utilization rates for smoking cessation treatments as well as quit rates among their members.
- ➔ Healthcare plans should **reimburse** their participating clinicians for providing smoking cessation counseling and referring patients to other cessation treatments.
- ➔ State legislatures and/or insurance regulators should require all insurance companies operating in the state to cover defined, comprehensive smoking cessation treatments as a **minimum standard benefit** and require that these companies publicly and annually report the number of covered lives with access to comprehensive treatment. Regulators should establish systems to ensure compliance with these provisions.
- ➔ Insurance purchasers, both public and private, should **insert specific provisions** into all contracts with insurance providers to provide coverage of comprehensive cessation treatments. Language in these provisions should be detailed and specific to ensure comprehensive coverage. Purchasers should be sure to enforce these contract provisions and ensure compliance.
- ➔ **Statewide quitlines** are a vital component of cessation coverage and should be adequately supported by the states. These quitlines can and should provide a vital link between all other cessation treatments offered in the state.
- ➔ **More research** is needed on the effectiveness of smoking cessation programs, including online treatments, as well as the prevalence of cessation coverage in private insurance plans.