

Tobacco Cessation Treatment: An 'A'-Rated Preventive Service

On September 21, 2015, the U.S. Preventive Services Task Force (USPSTF) released an updated recommendation regarding tobacco cessation treatment, affirming that tobacco cessation treatment is an 'A'-rated preventive service. This updated recommendation has far-reaching effects on how clinicians and insurance plans help tobacco users quit.

The Affordable Care Act and the U.S. Preventive Services Task Force

The [USPSTF](#) is an independent, volunteer panel of national experts in prevention and evidence-based medicine. The Task Force makes evidence-based recommendations about clinical preventive services such as screenings, counseling services and preventive medications. Recommendations are made based on the strength of evidence and the balance of benefits and harms of a preventive service, and range from 'A' ("high certainty that the net benefit is substantial") to 'D' ("moderate or high certainty that the service has no net benefit or that the harms outweigh the benefits") or 'I' ("evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined"). USPSTF updates its recommendations periodically to incorporate the latest evidence.

The Affordable Care Act requires most private health insurance plans to cover all preventive services the USPSTF rates an 'A' or 'B'. Plans must cover these treatments without cost-sharing, including deductibles, cost-sharing and co-payments.ⁱ Plans that are required to cover these services, including tobacco cessation, without cost-sharing are:

- Private group plans (large and small groups) that are not grandfatheredⁱⁱ
- Individual private plans that are not grandfatheredⁱⁱ
- Plans offered through State Health Insurance Marketplaces
- Alternative Benefit Plans (i.e., plans offered to the Medicaid expansion population)

Updated Tobacco Cessation Recommendation

The [updated USPSTF recommendation on behavioral and pharmacotherapy interventions for tobacco smoking cessation in adults, including pregnant women](#) states "the USPSTF recommends that clinicians ask all adults about tobacco use, advise them to stop using tobacco, and provide behavioral interventions and U.S. Food and Drug Administration (FDA)-approved pharmacotherapy for cessation to adults who use tobacco (A recommendation)." The task force also recommended clinicians deliver behavioral interventions to pregnant tobacco users of any age. The Task Force gave 'I' grades to using pharmacotherapy with pregnant women and using electronic nicotine delivery system (ENDS) products to help anyone quit tobacco.

The recommendation makes it clear that both behavioral interventions (counseling) and pharmacotherapy (medications) are "effective and recommended; combinations of interventions are most effective...clinicians should consider the patient's specific medical history and preferences and offer and provide the combination that works best for the patient."ⁱⁱⁱ The USPSTF references the [U.S. Public Health Service Guideline on Treating Tobacco Use and Dependence](#), and both bodies recommend the following forms of medication and counseling to help tobacco users quit:^{iv}

- | | |
|---|--|
| <input type="checkbox"/> Nicotine patch | <input type="checkbox"/> Bupropion |
| <input type="checkbox"/> Nicotine gum | <input type="checkbox"/> Varenicline |
| <input type="checkbox"/> Nicotine lozenge | <input type="checkbox"/> Individual counseling |
| <input type="checkbox"/> Nicotine nasal spray | <input type="checkbox"/> Group counseling |
| <input type="checkbox"/> Nicotine inhaler | <input type="checkbox"/> Telephone counseling |

The previous version of this USPSTF recommendation also rated tobacco cessation interventions as an ‘A’ preventive service.^v However, the 2015 updated recommendation strengthens its previous recommendation in several ways:

- By making it clear in the recommendation summary statement that behavioral AND pharmacotherapy interventions are included as an A-rated preventive service.
- By adding reference in the recommendation summary statement to clinicians asking all adults about tobacco use and *advising them to stop using tobacco*. The updated recommendation summary now more closely mirrors the 5 A’s and “Ask, Advise, Refer” treatment models cited in the recommendation.
- By clarifying in the clinical considerations section for nonpregnant adults that [emphasis added] “both intervention types (pharmacotherapy and behavioral interventions) are effective and recommended; combinations of interventions are most effective, *and all should be offered*.” This section also specifically mentions each of the ten cessation treatments currently recommended by USPSTF and the U.S. Public Health Service.
- By clearly stating that there is not sufficient evidence to establish the safety of or recommend the use of ENDS products and clinicians should “direct patients who smoke tobacco to other cessation interventions with established effectiveness and safety.”

Implications for Insurance Coverage of Tobacco Cessation Treatments

Most private health insurance plans have been required to cover tobacco cessation treatment as a preventive service since shortly after the ACA was enacted in 2010. With the creation of state health insurance marketplaces and Medicaid expansion (where applicable), more Americans gained access to insurance plans required to cover these benefits. However, evidence has shown that not all plans are providing a comprehensive tobacco cessation benefit.^{vi} ^{vii} The American Lung Association and its partners have asked the federal government to issue a new “FAQ” based on the updated USPSTF recommendation.

ⁱ See Sec. 1001 of the Patient Protection and Affordable Care Act, available here:

<http://housedocs.house.gov/energycommerce/ppacacon.pdf>

ⁱⁱ For more information about grandfathered health plans: <http://www.kaiserhealthnews.org/stories/2012/december/17/grandfathered-plans-faq.aspx>

ⁱⁱⁱ See Implementation Considerations of Behavioral and Pharmacotherapy Interventions for nonpregnant adults

^{iv} See Implementation Considerations of Behavioral and Pharmacotherapy Interventions for nonpregnant adults

^v See <http://www.uspreventiveservicestaskforce.org/Page/Topic/recommendation-summary/tobacco-use-in-adults-and-pregnant-women-counseling-and-interventions>

^{vi} American Lung Association. “State Health Insurance Marketplace Plans: New Opportunities to Help Smokers Quit.” August 2015 Update. Available at: <http://www.lung.org/assets/documents/publications/other-reports/state-health-insurance-opportunities.pdf>

^{vii} American Lung Association. Comments to USPSTF regarding draft recommendation on tobacco cessation. Submitted June 1, 2015. Available at: <http://www.lung.org/get-involved/advocate/advocacy-documents/uspstf-tobacco-cessation-ala.pdf>