

Welcome

Please stand by. We will begin shortly.

Tobacco Cessation Coverage: Implementation of the Affordable Care Act in 2014

Thursday, May 15, 2014 · 1pm ET (90 minutes)



Moderator



Jennifer Matekuare

- Operations Manager,
Smoking Cessation Leadership
Center, University of California,
San Francisco
- jmatekuare@medicine.ucsf.edu

Agenda

- **Welcome**
 - Jennifer Matekuare
- **Presentation**
 - Jennifer Singleterry
- **Q&A**
- **Closing Remarks**

Disclosure: Faculty speaker, moderator, and planning committee members have disclosed no financial interest/arrangement or affiliation with any commercial companies who have provided products or services relating to their presentation or commercial support for this continuing medical education activity.

Tobacco Cessation Coverage: Implementation of the Affordable Care Act in 2014

Webinar objectives

- Explain major initiatives of the ACA, and identify areas that affect tobacco users
- Identify tobacco cessation treatments covered for various populations in the state
- Learn to implement changes to systems and practices that will help tobacco users quit and take advantage of new opportunities

Housekeeping

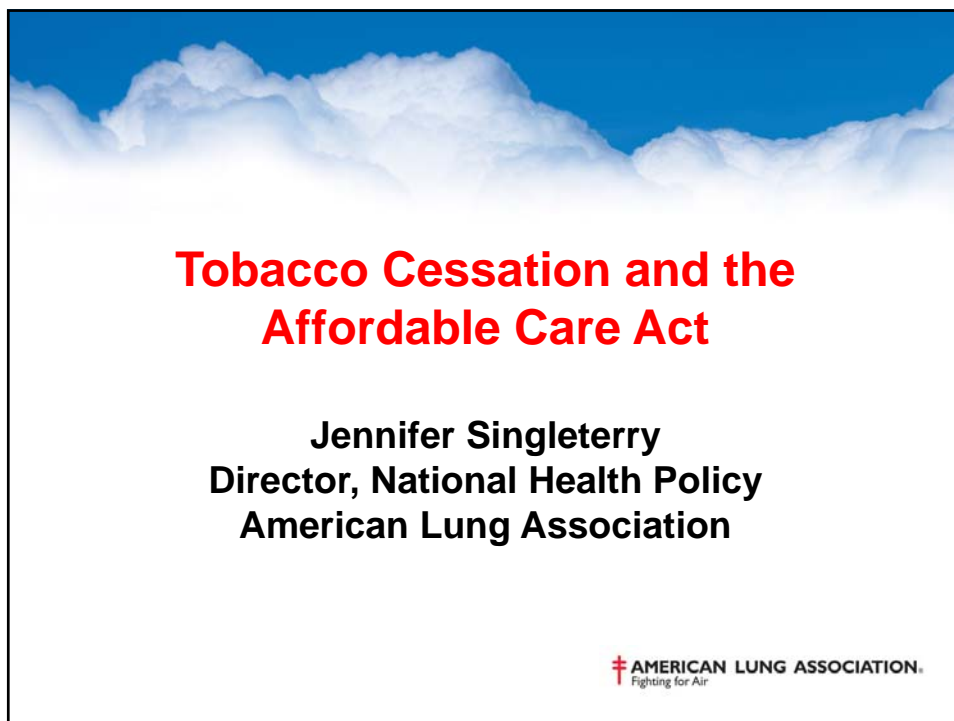
- All participants will be in **listen only mode**.
- Please **make sure your speakers are on** and adjust the volume accordingly.
- If you do not have speakers, please request the dial-in via the chat box.
- **This webinar is being recorded** and will be available on SCLC's website, along with the slides.
- **Use the chat box to send questions** at any time for the presenters.

Today's Speaker




Jennifer Singletery

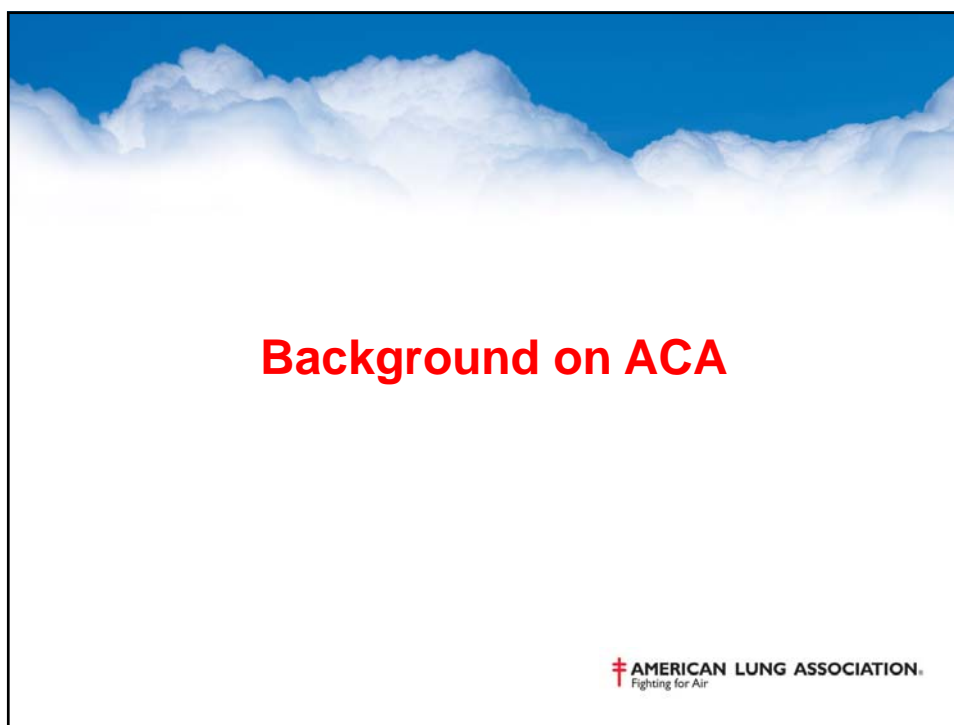
- Director, National Health Policy, American Lung Association




**Tobacco Cessation and the
Affordable Care Act**

**Jennifer Singleterry
Director, National Health Policy
American Lung Association**

 **AMERICAN LUNG ASSOCIATION.**
Fighting for Air



Background on ACA

 **AMERICAN LUNG ASSOCIATION.**
Fighting for Air

Acronyms

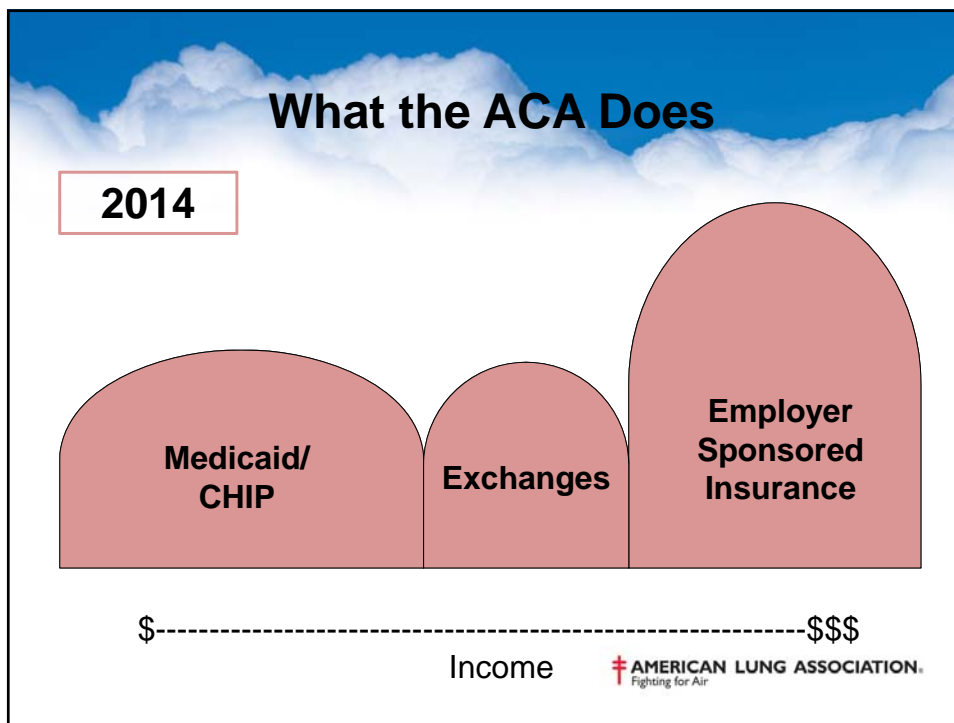
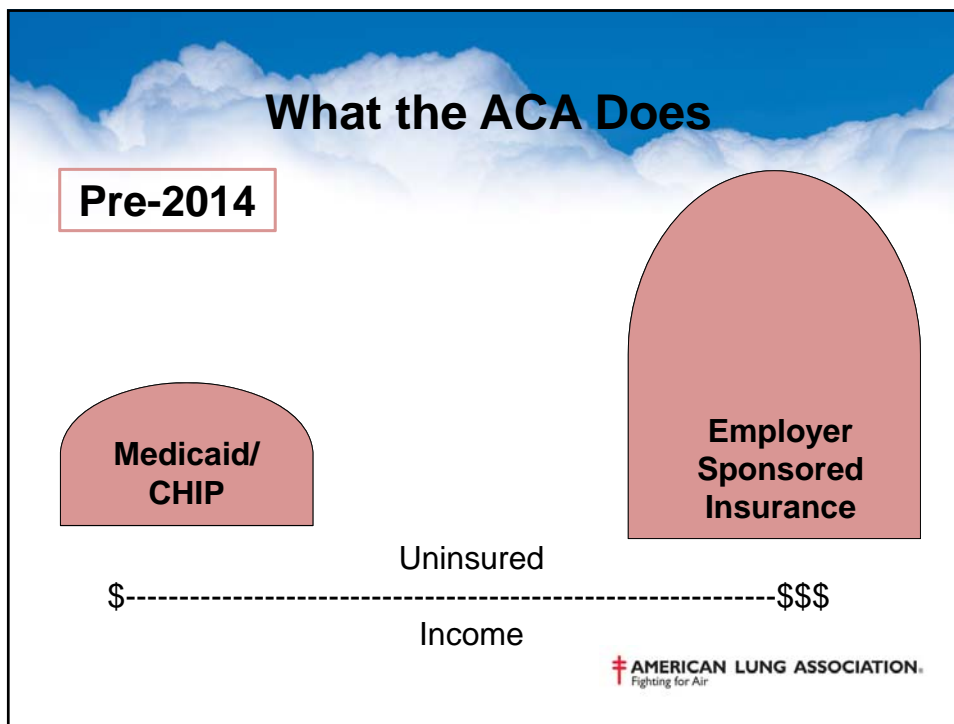
- **ACA** = Affordable Care Act (healthcare reform)
- **HHS** = U.S. Dept. of Health & Human Services
- **EHB** = Essential Health Benefits
- **CMS** = Centers for Medicare and Medicaid Services
- **USPSTF** = United States Preventive Services Task Force

 **AMERICAN LUNG ASSOCIATION.**
Fighting for Air

Federal Poverty Line = FPL

Persons in family	FPL	200% of FPL	300% of FPL	400% of FPL
1	\$11,170	22,340	33,510	44,680
2	15,130	30,260	45,390	60,520
3	19,090	38,180	57,270	76,360
4	23,050	46,100	69,150	92,200

 **AMERICAN LUNG ASSOCIATION.**
Fighting for Air



2014

Medicaid: EVERYONE who makes up to 138% FPL (in states that expand Medicaid)

– Traditional vs. expansion

Exchanges: open to everyone

- Subsidies: 139-400% FPL, and do not have “affordable” coverage through employer

Employer Sponsored Insurance: No changes to eligibility, just better coverage

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

The Uninsured

Who are the uninsured post-2014?

- < 100% FPL in states that don't expand Medicaid
 - Childless adults, parents, disabled
- Choose to pay penalty rather than buy insurance
 - “young invincibles”, anti-Obamacare
- Legal immigrants <100% FPL caught in Medicaid waiting period
- Illegal immigrants
- Unreachables

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Timeline

2010

2011

2012


2013

2014

2015


2016


- Requirements for private insurance, Medicare
- Implementation work, regulations
- October 1: Open enrollment in marketplaces (and Medicaid) begins
- **January 1: Coverage through marketplaces (and Medicaid) begins**
- November: Open enrollment begins again
- **HHS to re-evaluate marketplaces**

 AMERICAN LUNG ASSOCIATION.
 Fighting for Air

ACA: Hot Topics

- Lawsuits
- Enrollment results
- Problems with exchanges
- Medicaid expansion



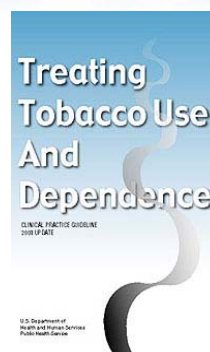
 AMERICAN LUNG ASSOCIATION.
 Fighting for Air

Background on Tobacco Cessation

 **AMERICAN LUNG ASSOCIATION.**
Fighting for Air

Comprehensive Benefit

- 7 medications
 - 5 NRTs
 - Bupropion
 - Varenicline
- 3 types of counseling
 - Individual (face-to-face)
 - Group
 - Phone
- Easy to access/no limits



 **AMERICAN LUNG ASSOCIATION.**
Fighting for Air

Barriers to Access

- Cost-sharing
- Prior authorization
- Duration limits
- Yearly or lifetime limits
- Dollar limits
- Stepped care therapy
- Required counseling



 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Preventive Services

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

U.S. Preventive Service Task Force

- An independent, volunteer panel of national experts in prevention and evidence-based medicine
- Make evidence-based recommendations for clinical preventive services for clinicians
 - Assigns each recommendation a letter grade based on the strength of the evidence and balance of benefits and harms (A, B, C, or D grade, or I statement)

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Preventive Services

Private/employer-sponsored insurance plans (not grandfathered)

Plans in state exchanges

Preventive Services =
required coverage, with
no cost-sharing

Small group and individual plans

Medicaid expansion plans

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Preventive Services

- Cancer screenings
 - New B recommendation for lung cancer screenings
- Immunizations
- Blood pressure screenings
- Cholesterol screenings
- STI counseling

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Tobacco

- A Grade: Counseling and Interventions
 - Adults
 - Pregnant women
- B Grade: Education and Brief Counseling for Prevention
 - School-aged children & adolescents

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Tobacco Cessation FAQ

- HHS, Labor and Treasury released guidance in an FAQ on May 2, 2014
- “Plans may use reasonable medical management techniques to determine the frequency, method, treatment, or setting for a recommended preventive service.”
- A plan will be considered to meet the requirement, if **for example**, it covers...

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Tobacco Cessation FAQ

- 4 sessions of individual, group or phone counseling
- 90 days of 1 of the FDA-approved smoking cessation medications, when proscribed
- No cost-sharing
- No prior authorization
- At least 2 quit attempts per year

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Coverage & Coverage Requirements

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Essential Health Benefit

- Ambulatory patient services
- Emergency services
- Hospitalization
- Maternity and newborn care
- **Mental health and substance use disorder services**
- **Prescription drugs**
- Rehabilitative and habilitative services and devices
- Laboratory services
- **Preventive and wellness services and chronic disease management**
- Pediatric services, including oral and vision care

ACA: directs HHS Secretary to establish an Essential Health Benefit – a minimum federal standard

- Must include 10 categories of coverage
- Supplementation required if an EHB-required plan does not have all 10 categories

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Essential Health Benefit

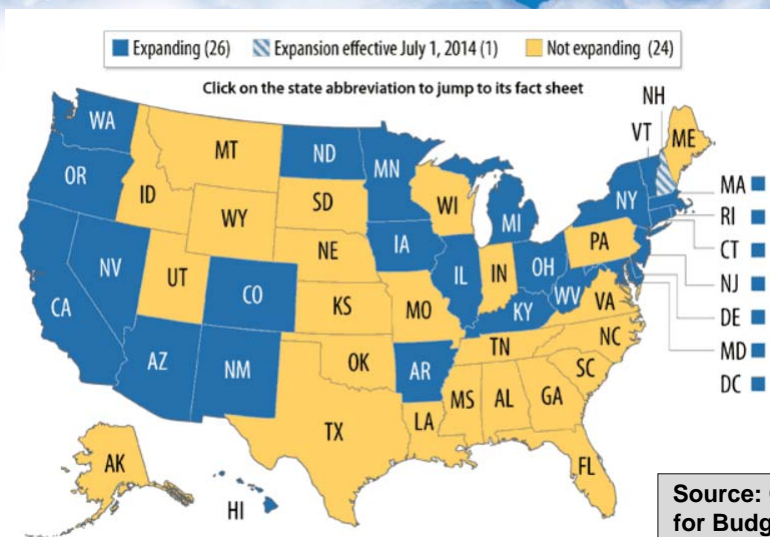
Applies to:

- Medicaid expansion plans
- Plans offered in State Health Insurance Marketplaces
- Individual plans
- Small group plans



©N.

Medicaid Expansion: Where Do States Stand?



What Happens if My State Doesn't Expand?

- People who make 100% FPL or above will be eligible for subsidies in the exchanges
- People who make below FPL and are not eligible for traditional Medicaid will not have any options
 - Parents
 - Childless adults
 - Adults with chronic mental illness or disabilities

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Medicaid Expansion Plans – Preventive Services

- Must cover all preventive services given an 'A' or 'B' by the USPSTF
- Cost sharing is not allowed (victory for patient advocacy groups!)

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Medicaid Expansion Plans – Tobacco Cessation Drugs

- Prescription Drugs
 - Each plan must cover at least one drug per category
 - Preferred Drug Lists/Formularies
 - Pay attention to barriers

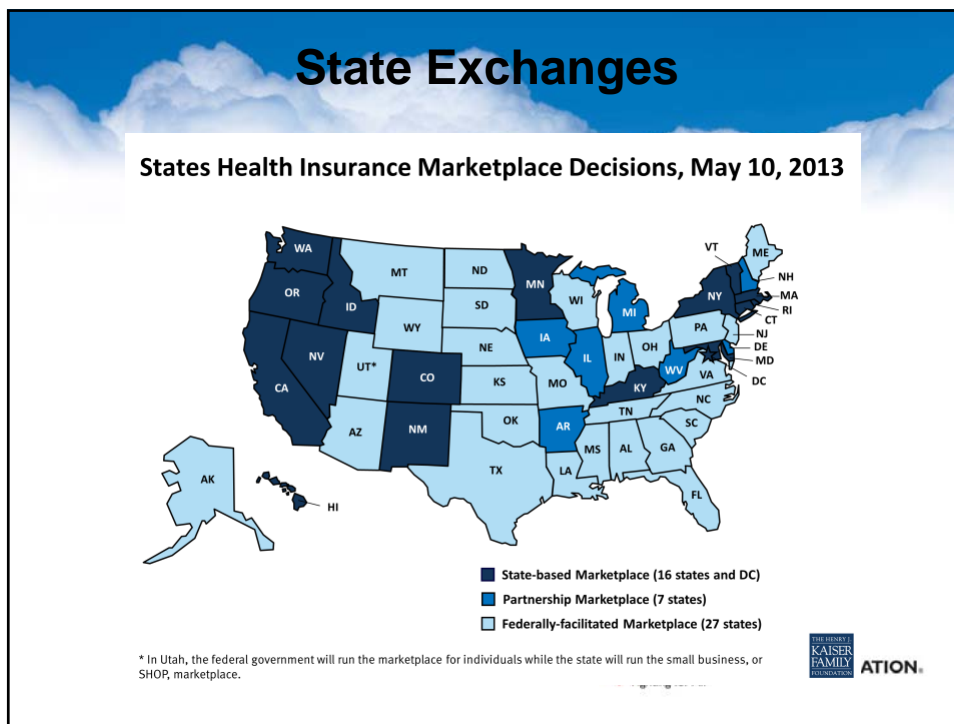
 AMERICAN LUNG ASSOCIATION.
Fighting for Air

What are States Covering?

Evidence is anecdotal at this point, but it looks like states are taking one of two options:

- 1) Incorporating the expansion population into traditional Medicaid coverage
 - In some cases this can involve making changes to traditional Medicaid coverage so it meets EHB requirements
- 2) Applying for waivers to send expansion population into the exchanges

 AMERICAN LUNG ASSOCIATION.
Fighting for Air



Exchanges – Preventive Services

- EHB standard:
 - Must cover preventive services with no cost-sharing




AMERICAN LUNG ASSOCIATION.
 Fighting for Air

Exchanges –Prescription Drugs

- EHB standard:
 - Must cover at least 1 drug per category OR as many drugs per category as the benchmark plan



 AMERICAN LUNG ASSOCIATION.
Fighting for Air

What are States/Plans Doing?

- Find your state benchmark plan:
<http://www.cms.gov/CCIIO/Resources/Data-Resources/ehb.html>
- Beyond that: ????

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Employer-Sponsored Insurance

- Grandfathered vs. non-grandfathered
- Non-grandfathered plans have been required to cover preventive services with no cost-sharing since 2010
- No other coverage requirements

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

What are Plans Doing?

Evidence shows plans are not covering comprehensive cessation benefits.

- Colorado study
 - Fewer tobacco cessation treatments were covered than other areas of preventive service:
- Georgetown study
 - 4 out of 39 plans got close to a comprehensive benefit



 AMERICAN LUNG ASSOCIATION.
Fighting for Air

What are States/Plans Doing?

Will plans change coverage in response to the FAQ?

Will anyone be able to track this information?

Traditional Medicaid – Tobacco Cessation



- September 2010: comprehensive tobacco cessation benefit required for pregnant women
- January 1, 2014: States are no longer able to exclude tobacco cessation medications
 - What will this mean in implementation?
 - Watch barriers, preferred drug lists/formularies

What are States Doing?

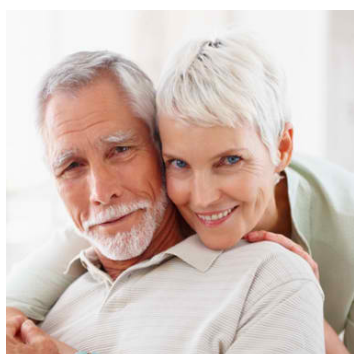
Find out what your state is covering here:
www.lung.org/cessationcoverage

Only two states cover a comprehensive benefit,
and all states have barriers to coverage

NOTE: traditional Medicaid plans CAN charge copays, but states can remedy this inequity!

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Medicare



- Added prevention visit
- No new requirements for preventive services
- Requires no cost-sharing for preventive services that are covered
- Individual counseling and prescription medications are covered for tobacco cessation

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Other Issues/Programs

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Tobacco Surcharges

- Variation in insurance premiums based on a policyholder's tobacco use
- AKA tobacco premiums, premium/rate differentials, non-smoker discounts
- ACA allows surcharges of up to 50% for tobacco use in small group & individual markets
- No restrictions for large group/self insured markets

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Tobacco Surcharges

- Punitive measures are not a proven effective cessation method
- We already know what works – why try an unproven method?
- Tobacco surcharges will make insurance unaffordable for tobacco users – **and their families**
- No one wants tobacco users to be uninsured



States can act!

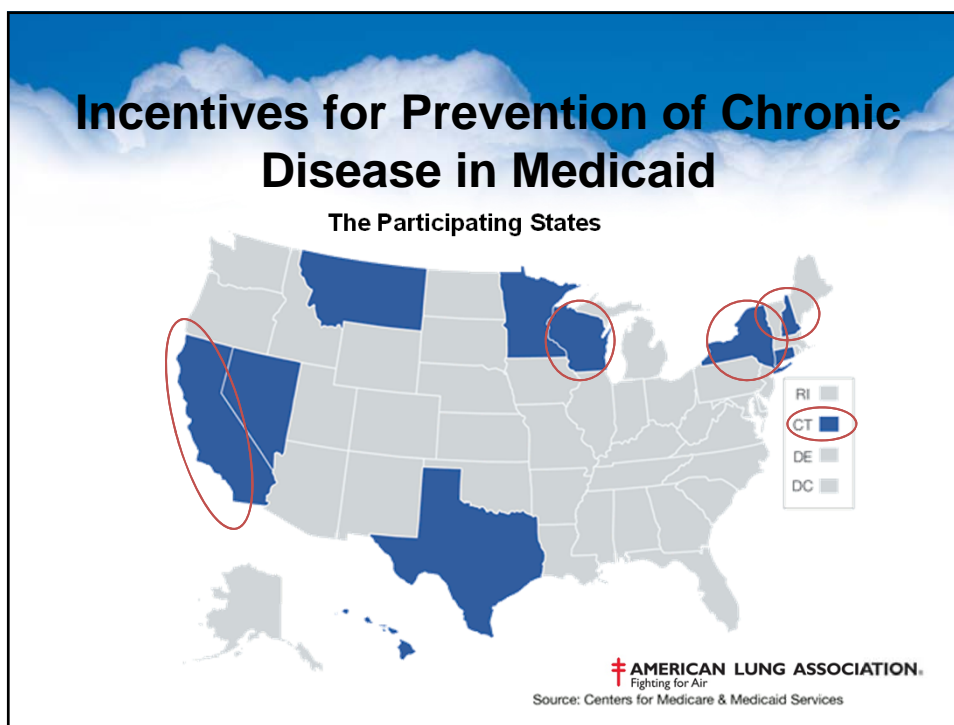
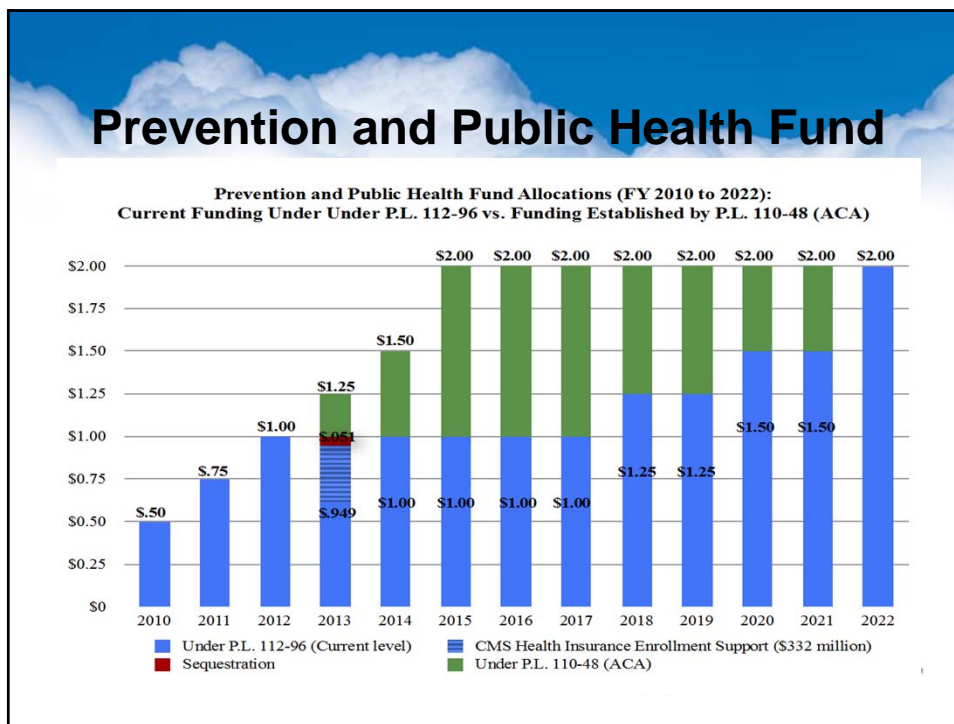
 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Prevention and Public Health Fund

- Started at \$500 million in 2010. Increases incrementally to \$2 billion in 2015.
- Purpose: provide vital funds for public health and wellness programs
- Activities:
 - Quitline funding
 - Tips from Former Smokers
 - Community Transformation Grants



 AMERICAN LUNG ASSOCIATION.
Fighting for Air



Quitlines

- Available to serve uninsured, or those with no coverage for counseling
- 1-800-QUITNOW
- Have been promoted and partially funded by \$ from Prevention and Public Health Fund
- Services vary by state – www.naquitline.org

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Summary & Resources

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Challenges & Next Steps

- Translation of USPSTF recommendations to coverage benefits
- Gaps in coverage
- Gaps in cost-sharing requirements
- Protection of PPHF
- Transparency in health plans & government
- Tobacco surcharges & other wellness programs requiring behavior change

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Resources for State-Specific Information

- Medicaid, state employee health plans:
www.lung.org/cessationcoverage
- Tobacco surcharges:
<http://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Market-Reforms/state-rating.html>
- Exchange Essential Health Benefit plans:
<http://www.cms.gov/CCIIO/Resources/Data-Resources/ehb.html>

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Info for Providers

If you have a patient who has...

- Medicaid
 - Their plan must cover all medications
 - Might require prior authorization, copays or have other limits
 - Their plan must cover counseling if they are pregnant, and might cover for others
 - To find out more:
 - www.lung.org/cessationcoverage
 - Check plan preferred drug list, other materials
 - Call the 1-800-number on the insurance card

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Info for Providers

If you have a patient who has...

- Medicare
 - Part B covers 4 sessions of individual counseling (99406 & 99407) per quit attempt, 2 quit attempts per year
 - Their Part D plan must cover prescription medications. Might cover OTC medications
 - To find out more:
 - Part D plan preferred drug list
 - Call 1-800-number on Part D plan card

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Info for Providers

If you have a patient who has...

- Private health insurance
 - Their plan **must** cover *something* to help smokers quit
 - Their plan **should** cover all treatments like the FAQ says
 - To find out more:
 - If you primarily serve patients from one plan, familiarize yourself with that plan's cessation program
 - Check preferred drug list, other plan documents
 - Call 1-800-number on insurance card
 - Ask about employer wellness programs

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

And now, a quick commercial...

 AMERICAN LUNG ASSOCIATION.
Fighting for Air

Cessation Technical Assistance Project

Cessation TA is funded by a CDC cooperative agreement to provide technical assistance to states and tobacco control groups regarding cessation.

Technical Assistance Area	Organization
Tobacco Cessation Coverage	American Lung Association
Health Systems Change	American Lung Association & American Academy of Pediatrics
Quitlines	North American Quitline Consortium



Check Out the Resource Library



www.lung.org/cessationta

*If you have a recommendation for a material to be included in the Resource Library, please send it to Anne at Cessationta@lung.org for review.



Join a Listserv

Cessation TA is operating 5 topic-based, 2-way Listservs:

Clinical Practices
Exchange Coverage
Medicaid Coverage
Private Insurance Coverage
Tobacco Surcharges

To Sign up for a listserv, please go to: <http://www.lung.org/stop-smoking/tobacco-control-advocacy/states-communities/cessationta/>



Join a Workgroup

Cessation TA is convening 4 topic-based workgroups:

Clinical Practices
Exchange Coverage
Medicaid Coverage
Private Insurance Coverage

If you are interested in joining a work group, contact Jennifer at Jennifer.Singleterry@lung.org



Thank you!

Jennifer Singleterry
Jennifer.Singleterry@lung.org
www.lung.org/cessationcoverage
www.lung.org/acatoolkit
www.lung.org/cessationta

 **AMERICAN LUNG ASSOCIATION.**
Fighting for Air

Questions and Answers



- Feel free to submit questions via the **chat box**

Contact SCLC for technical assistance



CME/CEUs of up to 1.5 credits are available to all attendees for a fee of \$35 per certificate. Instructions will be emailed after the webinar.

Save the date for SCLC's next webinar on Smoking and Dementia at **2pm ET on June 25th**

Sign up for our newsletter and listserv:

- <http://smokingcessationleadership.ucsf.edu>

Contact SCLC for technical assistance

Call us toll-free
1-877-509-3786



- Please help us by completing the post-webinar survey.
- Thank you for your continued efforts to combat tobacco.

CME/CEU Statement

Accreditation:

The University of California, San Francisco (UCSF) School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

UCSF designates this live activity for a maximum of *1.5 AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the webinar activity.

Nurse Practitioners and Registered Nurses: For the purpose of recertification, the American Nurses Credentialing Center accepts *AMA PRA Category 1 Credit™* issued by organizations accredited by the ACCME.

Physician Assistants: The National Commission on Certification of Physician Assistants (NCCPA) states that the *AMA PRA Category 1 Credits™* are acceptable for continuing medical education requirements for recertification.

California Pharmacists: The California Board of Pharmacy accepts as continuing professional education those courses that meet the standard of relevance to pharmacy practice and have been approved for *AMA PRA category 1 credit™*. If you are a pharmacist in another state, you should check with your state board for approval of this credit.

Social Workers: This course meets the qualifications for 1.5 hours of continuing education credit for MFTs and/or LCSWs as required by the California Board of Behavioral Sciences. If you are a social worker in another state, you should check with your state board for approval of this credit.