

CT MEDICAID covers:

- Individual tobacco use cessation counseling
- Over the counter nicotine replacement therapies (patch, gum and lozenge) with a prescription from a provider, prescription nicotine replacement therapies (nasal spray and inhaler) and prescription cessation medications (e.g. Varenicline, Bupropion.) Please refer to the CT Medicaid preferred drug list for preferred smoking cessation agents that do not require prior authorization.
- Group Cessation counseling is covered for behavioral health care providers, Federally Qualified Health Centers, medical clinics, hospital outpatient clinics and physicians/physician groups
- Reimbursement for individual cessation counseling is also available through dental care providers
- Counseling must be provided by a Medicaid-approved provider
- **For additional details including billing procedures and diagnosis coding go to <http://www.ctdssmap.com>**, see CT Medical Assistance Program Provider Bulletins 2015-37 and 2017-28. NOTE: this information is accurate as of December 2017. Please refer to <http://www.ctdssmap.com> for updates.

MEDICARE covers:

- Individual cessation counseling for two quit attempts per year - each attempt equals four counseling sessions with no cost sharing
- Counseling must be conducted by a Medicare-approved provider
- Counseling is covered regardless of whether patient has signs or symptoms of tobacco related disease
- Group counseling is not covered
- Medicare Part D covers prescription cessation medications
- Over the counter nicotine replacement therapies are not covered

TRICARE for Veterans and Active Military not covered by Medicare covers:

- Individual and group counseling for two quit attempts each year- each quit attempt equals 18 counseling sessions
- Counseling must be conducted by a TRICARE-authorized provider
- Over the counter nicotine replacement therapies and prescription cessation medications are covered with a prescription from a TRICARE-authorized provider
- Counseling and medications are provided at no cost

PRIVATE/COMMERCIAL INSURANCE Plans:

The Affordable Care Act (ACA) requires most plans to cover tobacco use cessation benefits as a preventive service. Benefits **should** include:

- Screening for tobacco use
- Individual and group cessation counseling for two quit attempts per year (four counseling sessions of at least ten minutes each)
- All US Food and Drug Administration-approved tobacco cessation medications (both over the counter and prescription nicotine replacement therapies and prescription cessation medications) for 90 days per quit attempt with a prescription from a health care provider
- No cost sharing or prior authorization for these treatments

ALL PATIENTS SHOULD CONTACT THEIR INSURANCE PROVIDER REGARDING THE SPECIFIC BENEFITS THAT ARE AVAILABLE UNDER THEIR PLAN