Appropriations Committee
Health and Hospitals - Department of Public Health
February 19, 2020

H.B. No. 5005 AN ACT ADJUSTING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE 30, 2021.

Re: Human Services - Department of Social Services – Medicaid Tobacco Cessation Services

The American Cancer Society Cancer Action Network (ACS CAN) appreciates the opportunity to provide comments on H.B. No. 5005 AN ACT ADJUSTING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE 30, 2021. ACS CAN, the nonprofit, non-partisan advocacy affiliate of the American Cancer Society advocates for public policies that reduce death and suffering from cancer including policies targeted at reducing tobacco use.

Tragically, 4,900 adults will die in Connecticut from smoking this year—13 per day. Meanwhile, 1300 kids will become new daily smokers—over 3 per day, every day[i]. Overall, 13.4% of adults in Connecticut and 7.9% of high school students smoke. However, the Centers for Disease Control reports that overall tobacco use among middle and high school students is on the rise for the first time in almost a decade, driven largely by the overwhelming increase in youth e-cigarette use. We cannot afford to go backwards while Connecticut still incurs $2.03 billion in annual health care costs and another $1 billion in lost productivity directly caused by tobacco.

We applaud Governor Lamont for proposing to continue to fund, at existing levels, comprehensive tobacco cessation services through Medicaid. With this proposal, Medicaid enrollees will continue to have access to cessation services including prescription drugs, nicotine replacement therapy and counseling.

In fact, Connecticut began providing funding for tobacco use cessation services through Medicaid in 2011 and is currently one of only nine states that provides coverage of all seven FDA approved smoking cessation medications as well as individual and group counseling.

The need is clear: Connecticut Medicaid beneficiaries smoke at almost a 50% higher rate

than the population as a whole and tobacco use costs Medicaid $508 million per year in Connecticut--costs borne primarily by Connecticut taxpayers[ii]. Nationally, tobacco use accounted for almost 15% (39 billion) of all Medicaid expenditures between 2006-2010.

Research has long indicated that one of the most effective and sweeping methods of significantly reducing smoking among adults and youth is through providing cessation services. Medicaid enrollees are more likely to need cessation support given their economic status and higher likelihood of tobacco use. Additionally, people respond differently to different interventions; therefore, coverage for a range of counseling types and medications is essential.

The Governor's proposal to continue funding of Medicaid coverage of comprehensive tobacco cessation services allows the state to continue to take advantage of federal matching funds, reach a higher concentration of lower income smokers and ease the impact tobacco related illnesses have on the cost of the program.

Despite significant progress since the first Surgeon General's report, issued more than 50 years ago, tobacco-related diseases remain the single most preventable cause of death in our society, and yet, according to DPH statistics, _tobacco use continues to kill more people in Connecticut each year than alcohol, AIDS, car crashes, illegal drugs, accidents, murders and suicides combined[iii]._

Thank you for your consideration of our comments.

Bryte Johnson
Connecticut Government Relations Director
American Cancer Society Cancer Action Network

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[i] CDC, _Best Practices for Comprehensive Tobacco Control Programs—2014._
[ii] Campaign for Tobacco Free Kids – The Toll of Tobacco in Connecticut, 2015. https://www.tobaccofreekids.org/facts_issues/toll_us/connecticut

[iii] https://authoring.ct.egov.com//DPH/Health-Information-Systems--Reporting/Mortality/Mortality-Tables--2000-to-2014-with-74-Cause-of-Death-Codes