



DOMESTIC/FOREIGN INSURERS BULLETIN NO. 72

TO: All Insurance Companies That Write Health Insurance Coverage in Delaware

RE: Tobacco Cessation as Preventative Service Coverage

DATED: September 30, 2014

The Patient Protection and Affordable Care Act (ACA) requires most health insurance plans to cover preventive services for tobacco cessation.

Guidance for Health Plans was issued on May 2, 2014, by the U.S. Departments of Health and Human Services, Labor and Treasury in the form of an FAQ, on insurance coverage of tobacco cessation as a preventive service.

The guidance states that health plans will be considered to be in compliance with the ACA preventive services requirements if they cover the following benefits:

1. Screening for tobacco use;
2. Two quit attempts per year, consisting of:
 - Four sessions of telephone, individual or group cessation counseling lasting at least 10 minutes each per quit attempt; and
 - All medications approved by the FDA as safe and effective for smoking cessation, for 90 days per quit attempt, when prescribed by a health care provider.

The guidance also reiterates that plans must not include cost-sharing for these treatments, and that plans should not require prior authorization for any of these treatments.

The following health plans are required to cover tobacco cessation as a preventive service:

- Private group plans (large and small groups) that are not grandfathered;
- Individual private plans that are not grandfathered; and
- Plans offered through State Health Insurance Marketplaces.

Fully implementing this guidance will make evidence-based tobacco cessation treatments available to millions of Americans, including many newly insured Americans, and would be expected to result in more tobacco users trying to quit and succeeding.

This Bulletin shall be effective immediately and shall remain in effect unless withdrawn or superseded by subsequent law, regulation or bulletin.



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Delaware Insurance Commissioner