

**Letter of Direction #34**

**Date:** May 20, 2020  
**To:** Centennial Care 2.0 Managed Care Organizations  
**From:** Nicole Comeaux, Director, Medical Assistance Division  
**Subject:** Tobacco Cessation Coverage for all MAP Recipients  
**Title:** Tobacco Cessation Coverage



The purpose of this Letter of Direction (LOD) is to clarify HSDs expectations of tobacco cessation coverage for products and services for all Medical Assistance Program (MAP) recipients, in alignment with the attached grid which resulted from a 2019 MCO deliverable.

The NMAC 8.310.2.12, currently states, “(R) Smoking cessation: MAD covers tobacco cessation services for a pregnant MAP eligible recipient and for a MAP eligible recipient under the age of 21 years of age.” HSD is in the process of updating the NMAC to cover all MAP recipients.

The language for the covered benefits (attachments 2 and 5) has been updated in Amendment 2 of the Medicaid Managed Care Services Agreement as follows:

Tobacco Cessation treatment and services (may include counseling, prescription medications, and products).

MCO member materials and websites should be updated accordingly.

**A new section 4.5.17 of the Agreement is also being added which states:**

**4.5.17 Tobacco Cessation Program**

4.5.17.1 The CONTRACTOR shall operate a tobacco cessation program to assist Members with tobacco cessation.

4.5.17.1.1 The tobacco cessation program shall include, at a minimum, the following:

4.5.17.1.1.1 Cessation Quitline;

4.5.17.1.1.2 Group counseling;

4.5.17.1.1.3 Individual counseling;

4.5.17.1.1.4 FDA approved pharmacotherapies and/or nicotine replacement therapies (NRT) such as Bupropion, Chantix, nicotine patch, chewing gum, nasal spray, inhaler and lozenges.

4.5.17.1.2 The CONTRACTOR shall not require prior authorization for tobacco cessation services, including counseling, or nicotine replacement products or therapies. The CONTRACTOR shall have no limits on length of treatment or quit attempts per year, no step therapy requirements, and shall encourage but not require enrollment in counseling for the tobacco cessation program.

**This LOD will sunset upon inclusion in the NMAC and the Medicaid Managed Care Services Agreement.**

If you have questions regarding this LOD please contact Devi Gajapathi at 505-827-6227.

Attachment #1- Medicaid Tobacco Cessation Coverage Chart Updated September 2019

**Medicaid Tobacco Cessation Coverage Chart**  
**Centennial Care and Medicaid Fee-for-Service (FFS)**  
**Updated September 2019**

Evidence-Based Practice	BlueCross BlueShield	Presbyterian	Western Sky	FFS
Nicotine lozenges	✓	✓	✓	✓
Nicotine patches	✓	✓	✓	✓
Nicotine chewing gum	✓	✓	✓	✓
Nicotine nasal sprays	✓	✓	✓	✓
Nicotine Inhaler	✓	✓	✓	✓
Bupropion	✓	✓	✓	✓
Chantix	✓	✓	✓	✓
Individual Counseling	✓	✓	✓	✓
Group Counseling	✓	✓	✓	✓
Cessation Quitline	✓	✓	✓	✓
No prior authorization	✓	✓	✓	✓
No cost sharing	✓	✓	✓	✓
No limits on length of treatment	✓	✓	✓	✓
No limits on quit attempts per year or	✓	✓	✓	✓
No requirements to try one treatment	✓	✓	✓	✓
No requirements to enroll in counseling	✓	✓	✓	✓