

**Subject** Tobacco and Nicotine Cessation

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### Overview

This bill sets in statute requirements for MA and MinnesotaCare coverage for tobacco and nicotine cessation services, drugs used to treat tobacco and nicotine addiction and dependence, and drugs used to help individuals discontinue use of tobacco and nicotine products.

### Summary

Section	Description
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<b>1</b>	<b>Tobacco and nicotine cessation.</b>
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Amends § 256B.0625, by adding subd. 68. (a) States that MA covers tobacco and nicotine cessation services, drugs to treat tobacco and nicotine addiction or dependence, and drugs to help individuals discontinue use of tobacco and nicotine products. Provides that MA must cover these services and drugs consistent with evidence-based or evidence-informed best practices.

(b) Requires MA to cover in-person individual and group tobacco and nicotine cessation education and counseling, if provided by a health care provider within scope of practice. Provides a partial list of providers who may provide these services.

(c) Requires MA to cover telephone cessation counseling services provided through a quitline service operated or under contract with a health carrier or other participating entity, and statewide quitline services operated by or under contract with the commissioner of health. Specifies requirements for payment levels. Allows the commissioner of human services, after consultation with the commissioner of health, to provide all telephone cessation counseling services through the statewide quitline service operated by or under contract with the commissioner of health.

(d) Requires MA to cover all prescription and over-the-counter drugs approved by the Food and Drug Administration for cessation of tobacco and nicotine use or treatment of tobacco and nicotine dependence, that are part of a Medicaid rebate agreement.

Section	Description
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(e) Allows services to be provided by telemedicine.

(f) Prohibits the commissioner from:

- 1) restricting or limiting the type, duration, or frequency of cessation services;
- 2) prohibiting the simultaneous use of multiple cessation services;
- 3) requiring counseling prior to or as a condition of receiving drugs;
- 4) limiting drug dosage amounts or frequency, or imposing duration or quantity limits;
- 5) prohibiting the simultaneous use of multiple drugs;
- 6) requiring or authorizing step therapy; or
- 7) requiring or using prior authorization or requiring a copayment or deductible.

(g) Provides that the commissioner must require all participating entities under contract to comply with this subdivision when serving MA and MinnesotaCare enrollees. Defines “participating entity” as a health carrier, county-based purchasing plan, accountable care organization, county integrated health care delivery network pilot, a network of health care providers established to provide services under MA or MinnesotaCare, or any other entity that has entered into capitation or risk-based payment arrangement or is paid under a reimbursement methodology with financial incentives to reduce the total cost of care.

**2 Cost-sharing.**

Amends § 256B.0631, subd. 1. Prohibits MA copayments for tobacco and nicotine cessation services and for drugs when used for tobacco and nicotine cessation.

**3 Cost-sharing.**

Amends § 256L.03, subd. 5. Prohibits cost-sharing under MinnesotaCare for tobacco and nicotine cessation services and for drugs used for tobacco and nicotine cessation.



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