

## Tobacco Cessation Policy

West Virginia Medicaid makes tobacco cessation services available to members enrolled in an approved phone coaching program\*. Medicaid members in Fee for Service, Aetna, Unicare and West Virginia Family Health Plans are eligible for enrollment in the Bureau for Public Health Quitline, which can be reached by calling 800-QUIT-NOW (800-784-8669). Medicaid members enrolled in The Health Plan should contact The Health Plan for information about enrolling in their tobacco cessation coaching program.

Nicotine replacement therapy and other smoking cessation agents are covered for all Medicaid members enrolled in one of the telephone coaching programs associated with their Medicaid coverage.

Smoking cessation agents fall into three general categories: Nicotine Replacement Therapies (NRT), Zyban (bupropion), and Chantix (varenicline). Drugs may be combined for concurrent use, unless contraindicated. All agents are first line therapies and will be covered for 12-weeks\*\*. The products covered and their daily maximum limits include:

- Nicotine gum – 24 pieces per day
- Nicotine patches – 1 patch per day
- Nicotine lozenges – 20 lozenges per day
- Nicotine inhalers – 16 cartridges per day
- Nicotine nasal spray – 12 spray bottles per 30 days (This therapy is reserved for those who have failed other forms of nicotine replacement therapy.)
- Bupropion – 300 mg. daily
- Varenicline – 2 mg. daily

\*Medicaid members, who are currently admitted to an in-patient facility and have initiated smoking cessation pharmacotherapy, may be granted a 4-week approval upon discharge. The prescriber should call Rational Drug Therapy Program at 1-800-847-3859 to obtain a short-term authorization. Quantity limits and step therapies may apply as specified above. The member is still required to initiate a call to the Quitline to be enrolled in an approved coaching program to have the remainder of their therapy covered by Medicaid. An additional 8 weeks of therapy shall be authorized after the member is fully enrolled with the coaching program. Requests for therapy beyond the initial combined 12-week approval may be granted if continuation of therapy requirements have been met.

**Approval Duration:** Initial approval is for 12-weeks. Additional therapy may be approved.

**\*\*Regarding continuation of therapy and multiple quit attempts:**

Prior authorization for continuation of therapy beyond the initial 12-week approval requires a written letter from the prescriber briefly addressing the efficacy of the current therapy, the reason a longer than typical course of therapy is required and the readiness of the patient to quit.

Medicaid understands that it is common for patients to fail multiple attempts at tobacco cessation. Coverage for multiple attempts per year is available, however documentation must be provided (as above) with the prior authorization request.

The Tobacco Cessation Extension form can be accessed below:

[Tobacco Cessation Extension Form](#) (clickable link)

<https://dhhr.wv.gov/bms/BMS%20Pharmacy/Pages/PA-Forms.aspx>

Additional information pertinent to practitioner services for tobacco cessation may be found in Medicaid manual chapter 519.18.