



519.18 TOBACCO CESSATION SERVICES

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DISCLAIMER: This chapter does not address all the complexities of Medicaid policies and procedures and must be supplemented with all State and Federal Laws and Regulations. Contact BMS Fiscal Agent for coverage, prior authorization requirements, service limitations, and other practitioner information.



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BACKGROUND

Tobacco use increases the risk for cancers, coronary artery disease, vascular disease, chronic pulmonary disease, and infertility, which increases the need for health care services.

West Virginia Medicaid offers tobacco cessation services to assist members to discontinue use of tobacco products. Through West Virginia Medicaid, participants have access to tobacco cessation medications, coaching, or counseling. Using evidence-based programs can more than double success rates of tobacco cessation.

POLICY

West Virginia Medicaid, in partnership with the Bureau for Public Health (BPH), offers a tobacco cessation program, known as the [West Virginia Tobacco Quitline](#), to assist members to discontinue use of tobacco products. Members can be enrolled as follows:

- Providers can call 1-800-QUIT-NOW (1-800-784-8669), or go to wvtobaccoquitline.com to enroll a Medicaid member; or
- Members can call 1-800-QUIT-NOW (1-800-784-8669), call or text 304-583-4010, or enroll at wvtobaccoquitline.com. A referral is not needed.

Participants are screened for their readiness to quit the use of tobacco and then referred to a Quitline coach. Written educational materials and continued support from a phone coach are available through the Quitline.

Nicotine replacement therapy and other smoking cessation agents are covered for West Virginia Medicaid members enrolled in the telephone coaching program. Smoking cessation agents fall in three general categories: Nicotine Replacement Therapy (NRT), Bupropion (Zyban), and Varenicline (Chantix®). All agents are first line therapy and are covered for 12 weeks per calendar year, with additional treatment at the request by the member's physician. The products include:

- Nicotine gum – 24 pieces per day;
- Nicotine patches – 1 patch per day;
- Nicotine lozenges – 20 lozenges per day;
- Nicotine inhaler – 168 inhalers per 30 days;
- Nicotine nasal spray – 4 spray bottles per 30 days (This therapy is reserved for members that have failed other forms of NRT);
- Bupropion – 300 mg per day (NRT and bupropion will not be covered concurrently); and
- Varenicline – 2 mg per day.

Drugs in this category may be combined for concurrent use, unless contraindicated. All tobacco cessation products must be prescribed by an enrolled practitioner within the scope of his/her license under West Virginia law. Prior authorization is required for coverage of tobacco cessation drugs and is coordinated through the Quitline. If the caller has the prescription information for nicotine replacement therapy available, the coach can send it to Rational Drug Therapy for approval. Authorization for therapy beyond the initial 12 weeks requires a written appeal from the prescriber with documentation of efficacy and patient compliance. A claims review will determine compliance with no more than a five-day lapse between pharmacy fills of current therapy. Women who are pregnant are also eligible for treatment, when

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appropriate. Refer to [Chapter 518, Pharmacy Services](#), for any additional information on covered tobacco cessation drug products. Additional information can be found on the [West Virginia Tobacco Quitline website](#). The BPH may also assist in providing services for those who are uninsured or under-insured.

In addition, West Virginia Medicaid may reimburse physicians, physicians assistants (PAs), and/or Advanced Practice Registered Nurses (APRNs) for tobacco cessation counseling to symptomatic members using Current Procedural Terminology (CPT) codes 99406 or 99407. These sessions are face-to-face, time sensitive, and must be documented in the member's medical record and available to BMS or its designee upon request. Sessions are limited to two per code per calendar year. This service can be billed on the same day as evaluation and management services if the evaluation and management service is significant and separately identifiable from the tobacco cessation counseling. The evaluation and management service must be billed with the appropriate modifier to indicate the additional service.

Non-covered services are not eligible for a West Virginia Department of Health and Human Resources (DHHR) Fair Hearing. See [42 § 431.220 When a hearing is required](#) for more information.

GLOSSARY

Definitions in [Chapter 200, Definitions and Acronyms](#) apply to all West Virginia Medicaid services, including those covered by this chapter. Definitions in this glossary are specific to this chapter.

Tobacco Cessation Services: Medications and counseling provided to discontinue the use of tobacco.

REFERENCE

West Virginia State Plan [Section 3.1–A\(4\)\(d\)](#) references smoking cessation services for pregnant women.

CHANGE LOG

REPLACE	TITLE	EFFECTIVE DATE
Entire Chapter	Tobacco Cessation Services	January 15, 2016
Entire Chapter	Added specific NRT and smoking cessation agents, added specific CPT codes covered for counseling, and formatted paragraphs.	March 1, 2020