

June 17, 2016

The Honorable Sylvia Matthews Burwell Secretary U.S. Department of Health & Human Services 200 Independence Ave, SW Washington, D.C. 20201

The Honorable Thomas E. Perez Secretary U.S. Department of Labor 200 Constitution Ave. NW Washington, D.C. 20210

The Honorable Jacob J. Lew Secretary U.S. Department of the Treasury 1500 Pennsylvania Ave. NW Washington, D.C. 20220

Dear Secretary Burwell, Secretary Perez and Secretary Lew:

The Affordable Care Act (ACA) has made great progress toward ensuring that all Americans have increased access to affordable, high quality health care. A major part of this effort was a focus on preventing disease rather than just treating disease. As you know, an important aspect of this was the coverage of recommended preventive benefits and services given an "A" or "B" rating by the United States Preventive Services Task Force (Task Force) with no out-of-pocket costs. We applaud the Administration's continued work in implementing the law. Unfortunately, it has come to our attention that not all insurance carriers are covering these services due at least in part to a lack of clear guidelines.

According to the 2014 Surgeon General's Report, *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*, tobacco use is the leading cause of preventable death in United States and responsible for the deaths of almost half a million Americans each year. Increasing access to comprehensive tobacco cessation treatment and services can help prevent these untimely deaths.

On September 21, 2015, the Task Force issued an update to its recommendations concerning tobacco cessation. While tobacco cessation still receives an "A" grade, recognizing the high value of this low-cost, low-risk intervention, the new recommendation adds clarity around the importance of all seven Food Drug Administration (FDA)-approved medications and the three forms of counseling.

Multiple studies, including those from Georgetown University and the American Lung Association, have shown that not everyone has access to a comprehensive tobacco cessation benefit recommended by the Task Force, and without clear guidance from HHS, what should be covered has been left open to interpretation by group plans and health insurance companies. [1] The May 2, 2014 "FAQs About the Affordable Care Act Implementation (Part XIX)" should be updated to ensure that consumers are provided with covered cessation treatments and counseling under the ACA. [2] Updated and clear guidance from the Administration is necessary to give carriers clear direction that all seven FDA-approved cessation medications and all forms of counseling must be covered without cost sharing.

As new research and treatments become available, including in tobacco cessation, there will be a need for additional updates to the Task Force's recommendations in order to ensure that consumers are able to access such advancements and innovation. There also should be a clear process in place to update the guidance when these recommendations are updated. Ensuring these benefits and services are covered without cost sharing is critical to strengthening our health care system, bringing down health care costs, and critically, saving lives.

Thank you for your attention to this matter.

Sincerely,

Senator Patty Murray United States Senator

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Senator Richard Blumenthal United States Senator Senator Tom Carper United States Senator

Senator Sherrod Brown United States Senator

^[1] Georgetown Law, Health Policy Institute, Implementation of tobacco cessation coverage under the Affordable Care Act: Understanding how private health insurance policies cover tobacco cessation treatments, http://www.tobaccofreekids.org/pressoffice/2012/georgetown/coveragereport.pdf; American Academy of Family Physicians, http://www.aafp.org/news/health-of-the-public/20140331tobacco-cessationltr.html
http://www.dol.gov/ebsa/faqs/faq-aca19.html



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