

The summary of information presented in this brochure is intended for Medicare fee-for-service physicians, providers, suppliers, and other health care professionals who furnish or provide referrals for and/or file claims for the Medicare-covered preventive benefit discussed in this brochure.

Tobacco use continues to be the leading cause of preventable disease and death in the United States. Although smoking rates have significantly declined, 9.3 percent of the population age 65 and older smokes cigarettes. Approximately 440,000 people die annually from smoking related diseases, with the majority of deaths—68 percent (300,000)—being among people ages 65 and older.

Smoking can attribute to and exacerbate heart disease, stroke, lung disease, cancer, diabetes, hypertension, osteoporosis, macular degeneration, abdominal aortic aneurysm, and cataracts. Smoking harms nearly every organ of the body and generally diminishes the health of smokers.

Quitting tobacco use can be difficult. Most smokers are dependent on nicotine, the psychoactive drug in tobacco products that produces dependence. Nicotine dependence is the most common form of chemical dependence in the U.S. Research suggests that nicotine is as addictive as heroin, cocaine, or alcohol. Quit attempts may be accompanied by symptoms of withdrawal, including irritability, anxiety, difficulty concentrating, and increased appetite. Tobacco dependence is a chronic condition that often requires repeated intervention.

Quitting smoking has immediate as well as long term affects. People who stop smoking greatly reduce their risk of dying prematurely and lower their risk of heart disease, stroke, lung disease and other health conditions caused by smoking. Benefits are greater for people who stop at earlier ages, but smoking cessation is beneficial at any age.

Older smokers have been shown to be more successful in their attempts to quit than younger smokers and respond favorably to their providers' advice to quit smoking. Brief clinical interventions and counseling by health care providers have been shown to increase the chances of successful cessation.

The Centers for Medicare & Medicaid Services (CMS) determined the evidence was adequate to conclude that smoking and tobacco-use cessation counseling, based on the current U.S. Public Health Service Guideline, is reasonable and necessary for certain individuals and should be covered by Medicare. Effective for services performed on or after March 22, 2005, Medicare provides coverage of two levels of counseling for smoking cessation (intermediate and intensive).

COVERAGE INFORMATION

Medicare provides coverage of smoking and tobacco-use counseling for beneficiaries who meet one of the following criteria:

- use tobacco and have a disease or an adverse health effect that has been found by the U.S. Surgeon General to be linked to tobacco use; or
- are taking a therapeutic agent whose metabolism or dosing is affected by tobacco use as based on Food and Drug Administration-approved information.

Medicare will cover two cessation attempts per year. Each attempt may include a maximum of four counseling sessions. The total annual benefit covers up to eight smoking and tobacco-use cessation counseling sessions in a 12-month period. The beneficiary may receive another eight counseling sessions during a second or subsequent year after 11 full months have passed since the first Medicare-covered cessation counseling



session was performed. For example, if the first of eight covered sessions was performed in April 2007, a second series of eight sessions may begin in April 2008.

Intermediate and intensive smoking cessation counseling services will be covered for outpatient and hospitalized beneficiaries who are smokers and meet all coverage requirements as long as those services are furnished by qualified physicians and other Medicare-recognized practitioners. Beneficiaries must be competent and alert at the time services are provided.

Eligible beneficiaries are covered under Medicare Part B. The coinsurance or copayment applies after the yearly Medicare Part B deductible has been met.

Note: Medicare's prescription drug benefit also covers smoking and tobacco-use cessation agents prescribed by a physician.



CESSATION COUNSELING ATTEMPT

A cessation counseling attempt occurs when a qualified physician or other Medicare-recognized practitioner determines that a beneficiary meets the eligibility requirements and initiates treatment with a cessation counseling attempt. A cessation counseling attempt includes the following:

- up to four cessation counseling sessions (one attempt = up to four sessions)

Two cessation counseling attempts (or up to eight cessation counseling sessions) are allowed every 12 months.

CESSATION COUNSELING SESSION

A cessation counseling session refers to face-to-face patient contact at one of two levels:

- intermediate (greater than 3 minutes up to 10 minutes); or
- intensive (greater than 10 minutes).

Cessation counseling sessions may be performed “incident to” the services of a qualified practitioner. During a 12-month period, the practitioner and the beneficiary have flexibility to choose between intermediate or intensive counseling strategies for each session.

Note: Medicare covers minimal counseling at each evaluation and management visit.

DOCUMENTATION

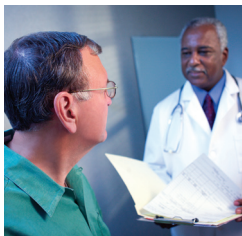
Keep patient record information on file for each Medicare patient for whom a smoking and tobacco-use cessation counseling claim is made. Medical record documentation must include standard information along with sufficient patient history to adequately demonstrate that Medicare coverage conditions were met.

Diagnosis codes should reflect the following:

- the condition the patient has that is adversely affected by tobacco use; or
- the condition the patient is being treated for with a therapeutic agent whose metabolism or dosing is affected by tobacco use.

FOR MORE INFORMATION

The Department of Health and Human Services has developed a website, Smokefree.gov, <http://www.smokefree.gov/hp.html>, that provides information, resources, and tools to support health professionals in delivering smoking cessation counseling services based on the Public Health Service clinical practice guideline on treating tobacco use and dependence.



The Centers for Disease Control and Prevention’s, Smoking and Tobacco Use website, <http://www.cdc.gov/tobacco/> provides information, resources, and clinical tools to assist health care professionals in delivering smoking cessation counseling.

The Centers for Medicare & Medicaid Services (CMS) has developed a variety of educational resources as part of a broad outreach campaign to promote awareness and increase utilization of preventive services covered by Medicare.

For more information about coverage, coding, billing, and reimbursement of Medicare-covered preventive services and screenings, visit http://www.cms.hhs.gov/MLNProducts/35_PreventiveServices.asp#TopOfPage on the CMS website.

MEDICARE LEARNING NETWORK (MLN)

The Medicare Learning Network (MLN) is the brand name for official CMS educational products and information for Medicare fee-for-service providers. For additional information visit the Medicare Learning Network’s web page at <http://www.cms.hhs.gov/MLNGenInfo> on the CMS website.

BENEFICIARY-RELATED INFORMATION

Smokefree.gov, <http://www.smokefree.gov>, provides accurate, up-to-date information and professional assistance to help support the immediate and long-term needs of people trying to quit smoking.

The official U.S. Government website for people with Medicare is located on the web at <http://www.medicare.gov>, or more information can be obtained by calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

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Medicare
Preventive
Services



For Physicians, Providers, Suppliers, and Other Health Care Professionals

Smoking and Tobacco-Use Cessation Counseling Services

