

117TH CONGRESS
1ST SESSION

S. _____

To amend title XIX and XXI of the Social Security Act to provide coverage of comprehensive tobacco cessation services under such titles, and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. CARPER (for himself and Ms. COLLINS) introduced the following bill; which was read twice and referred to the Committee on

A BILL

To amend title XIX and XXI of the Social Security Act to provide coverage of comprehensive tobacco cessation services under such titles, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Quit Because of
5 COVID–19 Act”.

6 **SEC. 2. COVERAGE OF COMPREHENSIVE TOBACCO CES-**
7 **SATION SERVICES IN MEDICAID.**

8 (a) REQUIRING MEDICAID COVERAGE OF COUN-
9 SELING AND PHARMACOTHERAPY FOR CESSATION OF TO-

1 BACCO USE AND TEMPORARY ENHANCED FMAP FOR
2 COVERAGE OF TOBACCO CESSATION SERVICES.—Section
3 1905 of the Social Security Act (42 U.S.C. 1396d) is
4 amended—

5 (1) by amending subsection (a)(4)(D) to read
6 as follows: “(D) counseling and pharmacotherapy for
7 cessation of tobacco use by individuals who are eligi-
8 ble under the State plan (as defined in subsection
9 (bb));”;

10 (2) in subsection (b), by inserting “(bb)(2),”
11 after “(aa),”; and

12 (3) by striking subsection (bb) and inserting
13 the following:

14 “(bb) COUNSELING AND PHARMACOTHERAPY FOR
15 CESSATION OF TOBACCO USE.—

16 “(1) IN GENERAL.—For purposes of this title,
17 the term ‘counseling and pharmacotherapy for ces-
18 sation of tobacco use by individuals who are eligible
19 under the State plan’ means diagnostic, therapy,
20 and counseling services and pharmacotherapy (in-
21 cluding the coverage of prescription and nonprescrip-
22 tion tobacco cessation agents approved by the Food
23 and Drug Administration) for the cessation of to-
24 bacco use by individuals who use tobacco products or

1 who are being treated for tobacco use that is fur-
2 nished—

3 “(A) by or under the supervision of a phy-
4 sician; or

5 “(B) by any other health care professional
6 who—

7 “(i) is legally authorized to furnish
8 such services under State law (or the State
9 regulatory mechanism provided by State
10 law) of the State in which the services are
11 furnished; and

12 “(ii) is authorized to receive payment
13 for other services under this title or is des-
14 ignated by the Secretary for this purpose;
15 which is recommended in the guideline entitled,
16 ‘Treating Tobacco Use and Dependence: 2008
17 Update: A Clinical Practice Guideline’ pub-
18 lished by the Public Health Service in May
19 2008 (or any subsequent modification of such
20 guideline) or is recommended for the cessation
21 of tobacco use by the U.S. Preventive Services
22 Task Force or any additional intervention ap-
23 proved by the Food and Drug Administration
24 as safe and effective in helping smokers quit.

1 “(2) TEMPORARY ENHANCED FMAP FOR COV-
2 ERAGE OF TOBACCO CESSATION SERVICES.—Not-
3 withstanding subsection (b), for calendar quarters
4 occurring during the period beginning on the date of
5 the enactment of this paragraph and ending 2 years
6 after the last day of the emergency period described
7 in section 1135(g)(1)(B), the Federal medical assist-
8 ance percentage with respect to amounts expended
9 by a State for medical assistance for counseling and
10 pharmacotherapy for cessation of tobacco use by in-
11 dividuals who are eligible under the State plan (as
12 defined in paragraph (1)) shall be equal to 100 per-
13 cent.”.

14 (b) NO COST SHARING.—

15 (1) IN GENERAL.—Subsections (a)(2) and
16 (b)(2) of section 1916 of the Social Security Act (42
17 U.S.C. 1396o) are each amended—

18 (A) in subparagraph (B), by striking “,
19 and counseling” and all that follows through
20 “section 1905(bb)(2)(A)”;

21 (B) by adjusting the left margins of sub-
22 paragraphs (H) and (I) so as to align with the
23 left margin of subparagraph (G);

24 (C) in subparagraph (H), by striking “or”
25 at the end;

1 (D) in subparagraph (I), by striking “;
2 and” and inserting “; or”; and

3 (E) by adding at the end the following new
4 subparagraph:

5 “(J) counseling and pharmacotherapy for
6 cessation of tobacco use by individuals who are
7 eligible under the State plan (as defined in sec-
8 tion 1905(bb)) and covered outpatient drugs (as
9 defined in subsection (k)(2) of section 1927 and
10 including nonprescription drugs described in
11 subsection (d)(2) of such section) that are pre-
12 scribed for purposes of promoting tobacco ces-
13 sation in accordance with the guideline specified
14 in section 1905(bb); and”.

15 (2) APPLICATION TO ALTERNATIVE COST SHAR-
16 ING.—Section 1916A(b)(3)(B) of the Social Security
17 Act (42 U.S.C. 1396o–1(b)(3)(B)) is amended—

18 (A) in clause (iii), by striking “, and coun-
19 seling and pharmacotherapy for cessation of to-
20 bacco use by pregnant women (as defined in
21 section 1905(bb))”;

22 (B) by adjusting the left margins of
23 clauses (xii) and (xiii) so as to align with the
24 left margin of clause (xi); and

1 (C) by adding at the end the following new
2 clause:

3 “(xiv) Counseling and
4 pharmacotherapy for cessation of tobacco
5 use by individuals who are eligible under
6 the State plan (as defined in section
7 1905(bb)) and covered outpatient drugs
8 (as defined in subsection (k)(2) of section
9 1927 and including nonprescription drugs
10 described in subsection (d)(2) of such sec-
11 tion) that are prescribed for purposes of
12 promoting tobacco cessation in accordance
13 with the guideline specified in section
14 1905(bb).”.

15 (c) EXCEPTION FROM OPTIONAL RESTRICTION
16 UNDER MEDICAID PRESCRIPTION DRUG COVERAGE.—
17 Section 1927(d)(2)(F) of the Social Security Act (42
18 U.S.C. 1396r-8(d)(2)(F)) is amended to read as follows:

19 “(F) Nonprescription drugs, except, when
20 recommended in accordance with the guideline
21 referred to in section 1905(bb), agents ap-
22 proved by the Food and Drug Administration
23 under the over-the-counter monograph process
24 for purposes of promoting tobacco cessation.”.

1 (d) STATE MONITORING AND PROMOTING OF COM-
2 PREHENSIVE TOBACCO CESSATION SERVICES UNDER
3 MEDICAID.—Section 1902(a) of the Social Security Act
4 (42 U.S.C. 1396a) is amended—

5 (1) in paragraph (86), by striking at the end
6 “and”;

7 (2) in paragraph (87), by striking the period at
8 the end and inserting “; and”; and

9 (3) by inserting after paragraph (87) the fol-
10 lowing new paragraph:

11 “(88) provide for the State to monitor and pro-
12 mote the use of comprehensive tobacco cessation
13 services under the State plan (including conducting
14 an outreach campaign to increase awareness of the
15 benefits of using such services) among—

16 “(A) individuals entitled to medical assist-
17 ance under the State plan who use tobacco
18 products; and

19 “(B) clinicians and others who provide
20 services to individuals entitled to medical assist-
21 ance under the State plan.”.

22 (e) FEDERAL REIMBURSEMENT FOR OUTREACH
23 CAMPAIGN.—Section 1903(a) of the Social Security Act
24 (42 U.S.C. 1396b(a)) is amended—

1 (1) in paragraph (7), by striking the period at
2 the end and inserting “; plus”; and

3 (2) by inserting after paragraph (7) the fol-
4 lowing new paragraph:

5 “(8) with respect to the development, imple-
6 mentation, and evaluation of an outreach campaign
7 to—

8 “(A) increase awareness of comprehensive
9 tobacco cessation services covered in the State
10 plan among—

11 “(i) individuals who are likely to be el-
12 igible for medical assistance under the
13 State plan; and

14 “(ii) clinicians and others who provide
15 services to individuals who are likely to be
16 eligible for medical assistance under the
17 State plan; and

18 “(B) increase awareness of the benefits of
19 using comprehensive tobacco cessation services
20 covered in the State plan among—

21 “(i) individuals who are likely to be el-
22 igible for medical assistance under the
23 State plan; and

24 “(ii) clinicians and others who provide
25 services to individuals who are likely to be

1 eligible for medical assistance under the
2 State plan about the benefits of using com-
3 prehensive tobacco cessation services;
4 for calendar quarters occurring during the pe-
5 riod beginning on the date of the enactment of
6 this paragraph and ending on 2 years after the
7 last day of the emergency period described in
8 section 1135(g)(1)(B), an amount equal to 100
9 percent of the sums expended during each quar-
10 ter which are attributable to such development,
11 implementation, and evaluation, and for cal-
12 endar quarters succeeding such period, an
13 amount equal to Federal medical assistance
14 percentage determined under section 1905(b) of
15 the sums expended during each quarter which
16 are so attributable.”.

17 (f) NO PRIOR AUTHORIZATION FOR TOBACCO CES-
18 SATION DRUGS UNDER MEDICAID.—Section 1927(d) of
19 the Social Security Act (42 U.S.C. 1396r–8(d)) is amend-
20 ed—

21 (1) in paragraph (1)(A), by striking “A State”
22 and inserting “Subject to paragraph (8), a State”;
23 and

24 (2) by adding at the end the following new
25 paragraph:

1 “(8) NO PRIOR AUTHORIZATION PROGRAMS FOR
2 TOBACCO CESSATION DRUGS.—A State plan may not
3 require, as a condition of coverage or payment for
4 a covered outpatient drug, the approval of an agent
5 to promote smoking cessation (including agents ap-
6 proved by the Food and Drug Administration) or to-
7 bacco cessation.”.

8 (g) EXCLUSION OF ENHANCED PAYMENTS FROM
9 TERRITORIAL CAPS.—Notwithstanding any other provi-
10 sion of law, for purposes of section 1108 of the Social Se-
11 curity Act (42 U.S.C. 1308), with respect to any addi-
12 tional amount paid to a territory as a result of the applica-
13 tion of section 1905(bb)(2) of the Social Security Act (42
14 U.S.C. 1396d(bb)(2))—

15 (1) the limitation on payments to territories
16 under subsections (f) and (g) of such section 1108
17 shall not apply to such additional amounts; and

18 (2) such additional amounts shall be dis-
19 regarded in applying such subsections.

20 (h) EFFECTIVE DATE.—The amendments made by
21 this section shall take effect on the first day of the first
22 fiscal year that begins on or after the date of enactment
23 of this Act.

1 **SEC. 3. COVERAGE OF COMPREHENSIVE TOBACCO CES-**
2 **SATION SERVICES IN CHIP.**

3 (a) REQUIRING CHIP COVERAGE OF COUNSELING
4 AND PHARMACOTHERAPY FOR CESSATION OF TOBACCO
5 USE.—

6 (1) IN GENERAL.—Section 2103(c)(2) of the
7 Social Security Act (42 U.S.C. 1397cc(e)(2)) is
8 amended by adding at the end the following new
9 subparagraph:

10 “(D) Counseling and pharmacotherapy for
11 cessation of tobacco use by individuals who are
12 eligible under the State child health plan.”.

13 (2) COUNSELING AND PHARMACOTHERAPY FOR
14 CESSATION OF TOBACCO USE DEFINED.—Section
15 2110(e) of the Social Security Act (42 U.S.C.
16 1397jj(c)) is amended by adding at the end the fol-
17 lowing new paragraph:

18 “(10) COUNSELING AND PHARMACOTHERAPY
19 FOR CESSATION OF TOBACCO USE.—The term ‘coun-
20 seling and pharmacotherapy for cessation of tobacco
21 use’ means diagnostic, therapy, and counseling serv-
22 ices and pharmacotherapy (including the coverage of
23 prescription and nonprescription tobacco cessation
24 agents approved by the Food and Drug Administra-
25 tion) for the cessation of tobacco use by individuals

1 who use tobacco products or who are being treated
2 for tobacco use that are furnished—

3 “(A) by or under the supervision of a phy-
4 sician; or

5 “(B) by any other health care professional
6 who—

7 “(i) is legally authorized to furnish
8 such services under State law (or the State
9 regulatory mechanism provided by State
10 law) of the State in which the services are
11 furnished; and

12 “(ii) is authorized to receive payment
13 for other services under this title or is des-
14 ignated by the Secretary for this purpose;
15 which is recommended in the guideline entitled,
16 ‘Treating Tobacco Use and Dependence: 2008
17 Update: A Clinical Practice Guideline’ pub-
18 lished by the Public Health Service in May
19 2008 (or any subsequent modification of such
20 guideline) or is recommended for the cessation
21 of tobacco use by the U.S. Preventive Services
22 Task Force or any additional intervention ap-
23 proved by the Food and Drug Administration
24 as safe and effective in helping smokers quit.”.

1 (b) NO COST SHARING.—Section 2103(e) of the So-
2 cial Security Act (42 U.S.C. 1397cc(e)) is amended by
3 adding at the end the following new paragraph:

4 “(5) NO COST SHARING ON BENEFITS FOR
5 COUNSELING AND PHARMACOTHERAPY FOR CES-
6 SATION OF TOBACCO USE.—The State child health
7 plan may not impose deductibles, coinsurance, or
8 other cost sharing with respect to benefits for coun-
9 seling and pharmacotherapy for cessation of tobacco
10 use (as defined in section 2110(c)(10)) and prescrip-
11 tion drugs that are covered under a State child
12 health plan that are prescribed for purposes of pro-
13 moting tobacco cessation in accordance with the
14 guideline specified in section 2110(c)(10)(B).”.

15 (c) EXCEPTION FROM OPTIONAL RESTRICTION
16 UNDER CHIP PRESCRIPTION DRUG COVERAGE.—Section
17 2103 of the Social Security Act (42 U.S.C. 1397cc) is
18 amended by adding at the end the following new sub-
19 section:

20 “(g) EXCEPTION FROM OPTIONAL RESTRICTION
21 UNDER CHIP PRESCRIPTION DRUG COVERAGE.—The
22 State child health plan may exclude or otherwise restrict
23 nonprescription drugs, except, in the case of—

24 “(1) pregnant women when recommended in ac-
25 cordance with the guideline specified in section

1 2110(e)(10)(B), agents approved by the Food and
2 Drug Administration under the over-the-counter
3 monograph process for purposes of promoting to-
4 bacco cessation; and

5 “(2) individuals who are eligible under the
6 State child health plan when recommended in ac-
7 cordance with the Guideline referred to in section
8 2110(e)(10)(B), agents approved by the Food and
9 Drug Administration under the over-the-counter
10 monograph process for purposes of promoting to-
11 bacco cessation.”.

12 (d) STATE MONITORING AND PROMOTING OF COM-
13 PREHENSIVE TOBACCO CESSATION SERVICES UNDER
14 CHIP.—Section 2102 of the Social Security Act (42
15 U.S.C. 1397bb) is amended by adding at the end the fol-
16 lowing new subsection:

17 “(d) STATE MONITORING AND PROMOTING OF COM-
18 PREHENSIVE TOBACCO CESSATION SERVICES UNDER
19 CHIP.—A State child health plan shall include a descrip-
20 tion of the procedures to be used by the State to monitor
21 and promote the use of comprehensive tobacco cessation
22 services under the State plan (including conducting an
23 outreach campaign to increase awareness of the benefits
24 of using such services) among—

1 “(1) individuals entitled to medical assistance
2 under the State child health plan who use tobacco
3 products; and

4 “(2) clinicians and others who provide services
5 to individuals entitled to medical assistance under
6 the State child health plan.”.

7 (e) FEDERAL REIMBURSEMENT FOR CHIP COV-
8 ERAGE AND OUTREACH CAMPAIGN.—

9 (1) IN GENERAL.—Section 2105(a) of the So-
10 cial Security Act (42 U.S.C. 1397ee(a)) is amended
11 by adding at the end the following new paragraph:

12 “(5) FEDERAL REIMBURSEMENT FOR CHIP
13 COVERAGE OF COMPREHENSIVE TOBACCO CES-
14 SATION SERVICES AND OUTREACH CAMPAIGN.—In
15 addition to the payments made under paragraph (1)
16 for calendar quarters occurring during the period be-
17 ginning on the date of the enactment of this para-
18 graph and ending on 2 years after the last day of
19 the emergency period described in section
20 1135(g)(1)(B), the Secretary shall pay—

21 “(A) an amount equal to 100 percent of
22 the sums expended during each quarter which
23 are attributable to the cost of furnishing coun-
24 seling and pharmacotherapy for cessation of to-
25 bacco use by individuals who are eligible under

1 the State child health plan (net of any pay-
2 ments made to the State under paragraph (1)
3 with respect to such counseling and
4 pharmacotherapy); plus

5 “(B) an amount equal to 100 percent of
6 the sums expended during each quarter which
7 are attributable to the development, implemen-
8 tation, and evaluation of an outreach campaign
9 to—

10 “(i) increase awareness of comprehen-
11 sive tobacco cessation services covered in
12 the State child health plan among—

13 “(I) individuals who are likely to
14 be eligible for medical assistance
15 under the State child health plan; and

16 “(II) clinicians and others who
17 provide services to individuals who are
18 likely to be eligible for medical assist-
19 ance under the State child health
20 plan; and

21 “(ii) increase awareness of the bene-
22 fits of using comprehensive tobacco ces-
23 sation services covered in the State child
24 health plan among—

1 “(I) individuals who are likely to
2 be eligible for medical assistance
3 under the State child health plan; and

4 “(II) clinicians and others who
5 provide services to individuals who are
6 likely to be eligible for medical assist-
7 ance under the State child health plan
8 about the benefits of using com-
9 prehensive tobacco cessation serv-
10 ices.”.

11 (2) ADJUSTMENT OF CHIP ALLOTMENTS.—Sec-
12 tion 2104(m) of the Social Security Act (42 U.S.C.
13 1397dd(m)) is amended—

14 (A) in paragraph (2)(B), by striking “ and
15 (12)” and inserting “(12), and (13)”; and

16 (B) by adding at the end the following new
17 paragraph:

18 “(13) ADJUSTING ALLOTMENTS TO ACCOUNT
19 FOR FEDERAL PAYMENTS FOR CHIP COVERAGE OF
20 COMPREHENSIVE TOBACCO CESSATION SERVICES
21 AND OUTREACH CAMPAIGN.—If a State (including
22 the District of Columbia and each commonwealth
23 and territory) receives a payment for a fiscal year
24 under section 2105(a)(5), the allotment determined

1 for the State for such fiscal year shall be increased
2 by the amount of such payment.”.

3 (f) NO PRIOR AUTHORIZATION FOR TOBACCO CES-
4 SATION DRUGS UNDER CHIP.—Section 2103 of the So-
5 cial Security Act (42 U.S.C. 1397cc), as amended by sub-
6 section (c), is further amended—

7 (1) in subsection (c)(2)(A), by inserting “(in ac-
8 cordance with subsection (h))” after “Coverage of
9 prescription drugs”; and

10 (2) by adding at the end the following new sub-
11 section:

12 “(h) NO PRIOR AUTHORIZATION PROGRAMS FOR TO-
13 BACCO CESSATION DRUGS.—A State child health plan
14 may not require, as a condition of coverage or payment
15 for a prescription drugs, the approval of an agent to pro-
16 mote smoking cessation (including agents approved by the
17 Food and Drug Administration) or tobacco cessation.”.

18 (g) EFFECTIVE DATE.—The amendments made by
19 this section shall take effect on the first day of the first
20 fiscal year that begins on or after the date of enactment
21 of this Act.

22 **SEC. 4. RULE OF CONSTRUCTION.**

23 None of the amendments made by this Act shall be
24 construed to limit coverage of any counseling or
25 pharmacotherapy for individuals under 18 years of age.