

MAINE STATE LEGISLATURE

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126th MAINE LEGISLATURE

FIRST REGULAR SESSION-2013

Legislative Document

No. 386

H.P. 261

House of Representatives, February 12, 2013

**An Act To Reduce Tobacco-related Illness and Lower Health Care
Costs in MaineCare**

(EMERGENCY)

Reference to the Committee on Health and Human Services suggested and ordered printed.

Millicent M. MacFarland
MILLICENT M. MacFARLAND
Clerk

Presented by Representative SANBORN of Gorham.
Cosponsored by Senator LANGLEY of Hancock and
Representatives: DILL of Old Town, FARNSWORTH of Portland, MacDONALD of
Boothbay, MORIARTY of Cumberland, PRINGLE of Windham, RANKIN of Hiram,
ROTUNDO of Lewiston, TREAT of Hallowell.

1 **Emergency preamble. Whereas,** acts and resolves of the Legislature do not
2 become effective until 90 days after adjournment unless enacted as emergencies; and

3 **Whereas,** tobacco use is the leading cause of preventable death in the United States
4 and in Maine; and

5 **Whereas,** in the United States, an estimated 443,000 deaths occur annually that are
6 attributable to smoking, including nearly 161,000 deaths from cancer, 128,000 from
7 cardiovascular diseases and 103,000 from respiratory diseases; and

8 **Whereas,** smoking costs Maine approximately \$602,000,000 each year in direct
9 medical costs and \$534,000,000 from productivity losses due to premature death,
10 including 10.6% of MaineCare expenditures, which is equivalent to \$216,000,000,
11 attributed to tobacco use; and

12 **Whereas,** MaineCare members are almost 2 1/2 times more likely to smoke than the
13 non-MaineCare adult population, yet are more likely to have a desire to quit tobacco use;
14 and

15 **Whereas,** tobacco cessation is one of the most effective clinical preventive services,
16 with clinical evidence that shows that smoking cessation interventions, including brief
17 behavioral counseling sessions and pharmacotherapy delivered in primary care settings,
18 are effective in increasing the proportion of smokers who successfully quit and remain
19 abstinent for one year and that the combination of counseling and medication is more
20 effective for smoking cessation than either medication or counseling alone. The United
21 States Preventive Services Task Force found convincing evidence that smoking cessation
22 decreases the risk for heart disease, stroke and lung disease. Tobacco cessation at any
23 point during pregnancy yields substantial health benefits for the expectant mother and
24 baby; and

25 **Whereas,** in the judgment of the Legislature, these facts create an emergency within
26 the meaning of the Constitution of Maine and require the following legislation as
27 immediately necessary for the preservation of the public peace, health and safety; now,
28 therefore,

29 **Be it enacted by the People of the State of Maine as follows:**

30 **Sec. 1. 22 MRSA §3174-WW** is enacted to read:

31 **§3174-WW. Tobacco cessation**

32 **1. Coverage.** The department shall provide coverage for comprehensive tobacco
33 cessation treatment to a MaineCare member who is 18 years of age or older or who is
34 pregnant. Coverage must include, at a minimum:

35 **A.** Coverage for all pharmacotherapy that is approved by the federal Food and Drug
36 Administration for tobacco dependence treatment or is recommended as effective in
37 the United States Public Health Service clinical practice guideline on treating tobacco
38 use and dependence; and

