



November 17, 2016

Dear Senator,

As supporters of tobacco cessation efforts to improve maternal and infant health, we write in support of the tobacco cessation provision in H.R. 670, the Special Needs Trust Fairness and Medicaid Improvement Act, and urge passage of this legislation. This important legislation will extend the comprehensive tobacco cessation benefit to new mothers for one-year post-partum through Medicaid. This provision builds on existing Medicaid policy that provides expectant mothers with tobacco cessation treatment, recognizing the importance of eliminating tobacco usage in supporting the health of both mother and baby. On September 20, 2016, H.R. 670 was approved in a vote of 383-22 by the House of Representatives, after having been reported by voice vote by the House Energy and Commerce Committee on July 13, 2016.

Tobacco use remains the leading cause of preventable death in our nation. Each year more than 480,000 Americans die from tobacco use, and 16 million Americans are currently living with a tobacco-caused disease. Tobacco use further places a heavy burden on the health care system and is responsible for \$170 billion in health care costs each year, more than 60 percent of which are paid for by government programs, such as Medicaid. Medicaid costs attributable to smoking total \$39.6 billion annually and represent 15 percent of all Medicaid expenditures.

Smoking rates among those with Medicaid coverage (29.1 percent) are more than double those with private health insurance (12.9 percent), and pregnant women with Medicaid are no exception, smoking at over three times the rate of pregnant women with private insurance. By extending a comprehensive tobacco cessation benefit to new mothers for one-year post-partum in Medicaid, Congress will continue its commitment to policies that support the health of children and families and encourage new mothers to quit smoking and stay quit.

We applaud efforts to reduce the harmful effects of secondhand smoke on children. Infants and young children are especially vulnerable to secondhand smoke. Babies exposed to secondhand

smoke are at greater risk of dying of sudden infant death syndrome. Infants and children exposed to secondhand smoke are at higher risk of illness, including acute lower respiratory infections such as bronchitis and pneumonia and ear infections. Further, secondhand smoke exposure causes children who already have asthma to experience more frequent and severe attacks. In addition to their human toll, these avoidable illnesses result in unnecessary and preventable health care spending. For example, Massachusetts experienced a 17 percent decrease in emergency department and clinic visits due to asthma after the state Medicaid program began covering a comprehensive tobacco cessation benefit for all individuals enrolled in its Medicaid program and initiated a public awareness campaign.

In addition to protecting children, providing smoking cessation treatment will help new mothers quit an addiction to a deadly product. Most smokers start smoking before they can fully understand the addictive power of nicotine, and once they are addicted, it is difficult to stop. Tobacco cessation treatment is a critical tool to boost the chances of success. Extending this provision provides a significant long-term return on investment in this population's health and wellbeing.

As a diverse group of organizations committed to supporting the health of all Americans, we urge swift passage of H.R. 670 and encourage you to join your colleagues in the House of Representatives in advancing this bill. Thank you for your consideration of this important legislation to support the health of America's children and families.

Sincerely,

American Academy of Pediatrics
American Lung Association
American Public Health Association
Campaign for Tobacco-Free Kids
National Association of Pediatric Nurse Practitioners