

## **George Washington Researchers Find that a Smoking Cessation Benefit Can Save Money for Medicaid**

WASHINGTON (Jan. 6, 2011)--New research by the George Washington University School of Public Health and Health Services indicates that including comprehensive tobacco cessation benefits in Medicaid insurance coverage can result in substantial savings for Medicaid programs. The study, titled “The Return on Investment of a Medicaid Tobacco Cessation Program in Massachusetts,” published by the open access journal *PLoS ONE*, found that every dollar spent in program costs resulted in an average program savings of \$3.12, which represents a \$2.12 return on investment. The research shows that investing in smoking cessation programs can result in lower levels of smoking, which in turn lead to reductions in hospital admissions for heart related problems and significant savings for Medicaid. The financial support for the research came from Partnership for Prevention.

“Smoking is the leading cause of preventable death in the United States,” said Leighton Ku, Ph.D., professor of Health Policy at the GW School of Public Health and Health Services, who led the research project. “Millions of low-income smokers in the U.S. are insured by Medicaid. In 2004, smoking-related Medicaid expenditures for all states combined was \$22 billion, which represented 11 percent of all Medicaid spending. Investments in comprehensive tobacco cessation services in Medicaid can improve the health of patients, as well as save money for states and the federal government.”

The research focused on estimating the costs of tobacco cessation programs compared to the savings that Medicaid will realize due to fewer inpatient hospital visits for heart attacks and related cardiovascular conditions. Researchers used data gathered from the 2002-2008 Medical Expenditure Survey and the Behavioral Risk Factor Surveillance Surveys to estimate the cost of hospital inpatient admissions for smokers covered by Medicaid. A smoking cessation program in Massachusetts, which offered a wide range of smoking cessation medications, as well as individual and group counseling for Medicaid recipients, proved to be successful and was estimated to have saved an average of \$388 per user per year.

The Patient Protection and Affordable Care Act (PPACA) will add millions of new Medicaid recipients in 2014 and tobacco cessation services in Medicaid could soon be offered to a much larger share of the low-income smoking population. Researchers concluded that despite the Medicaid budgetary shortfalls faced by state and federal governments, a comprehensive tobacco cessation program for Medicaid enrollees is an evidence-based policy strategy which should improve public health and reduce health care expenditures.

The full article can be found at:

<http://dx.plos.org/10.1371/journal.pone.0029665>

**About the George Washington University School of Public Health and Health Services:**

Established in July 1997, the School of Public Health and Health Services brought together three longstanding university programs in the schools of medicine, business, and education that we have since expanded substantially. Today, more than 1,100 students from nearly every U.S. state and more than 40 nations pursue undergraduate, graduate, and doctoral-level degrees in public health. Our student body is one of the most ethnically diverse among the nation's private schools of public health.

<http://sphhs.gwumc.edu/>

**About Partnership for Prevention:**

Partnership for Prevention was founded in 1991 by leaders dedicated to making disease prevention and health promotion national priorities and America a healthier nation.

ActionToQuit, Partnership's tobacco control initiative, urges all sectors – health care systems, employers, insurers, government agencies, quitlines, and policymakers – to work together to develop and promote sound tobacco control policies. [www.prevent.org](http://www.prevent.org)

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