

119TH CONGRESS
1ST SESSION

S. 2064

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

JUNE 12, 2025

Ms. BLUNT ROCHESTER introduced the following bill; which was read twice and referred to the Committee on Finance

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 “Helping Tobacco Users
5 Quit 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.

“(2) TEMPORARY ENHANCED FMAP FOR COVERAGE OF TOBACCO CESSATION SERVICES.—Notwithstanding subsection (b), for calendar quarters occurring during the period beginning on the date of the enactment of the Helping Tobacco Users Quit Act and ending 5 years after such date, the Federal medical assistance percentage with respect to amounts expended by a State for medical assistance for counseling and pharmacotherapy for cessation of tobacco use by individuals who are eligible under the State plan (as defined in paragraph (1)) shall be equal to 90 percent.”.

(b) NO COST SHARING.—

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

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

(B) in subparagraph (I), by striking “or” at the end;

(C) in subparagraph (J), by striking “; and” and inserting “; or”; and

(D) by adding at the end the following new subparagraph:

“(K) counseling and pharmacotherapy for cessation of tobacco use by individuals who are eligible under the State plan (as defined in section 1905(bb)) and covered outpatient drugs (as defined in subsection (k)(2) of section 1927 and including nonprescription drugs described in subsection (d)(2) of such section) that are prescribed for purposes of promoting tobacco cessation in accordance with the guideline specified in section 1905(bb); and”.

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

(A) in clause (iii), by striking “, and counseling and pharmacotherapy for cessation of tobacco use by pregnant women (as defined in section 1905(bb))”; and

(B) by adding at the end the following new clause:

“(xv) Counseling and pharmacotherapy for cessation of tobacco use by individuals who are eligible under the State plan (as defined in section 1905(bb)) and covered outpatient drugs (as defined in subsection (k)(2) of section

1 1927 and including nonprescription drugs
 2 described in subsection (d)(2) of such sec-
 3 tion) that are prescribed for purposes of
 4 promoting tobacco cessation in accordance
 5 with the guideline specified in section
 6 1905(bb).”.

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

11 “(F) Nonprescription drugs, except, when
 12 recommended in accordance with the guideline
 13 referred to in section 1905(bb), agents ap-
 14 proved by the Food and Drug Administration
 15 for purposes of promoting tobacco cessation.”.

16 (d) STATE MONITORING AND PROMOTING OF COM-
 17 PREHENSIVE TOBACCO CESSATION SERVICES UNDER
 18 MEDICAID.—Section 1902(a) of the Social Security Act
 19 (42 U.S.C. 1396a) is amended—

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

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

24 (3) by inserting after paragraph (87) the fol-
 25 lowing new paragraph:

1 “(88) provide for the State to monitor and pro-
 2 mote the use of comprehensive tobacco cessation
 3 services under the State plan (including conducting
 4 an outreach campaign to increase awareness of the
 5 benefits of using such services) among—

6 “(A) individuals entitled to medical assist-
 7 ance under the State plan who use tobacco
 8 products; and

9 “(B) clinicians and others who provide
 10 services to individuals entitled to medical assist-
 11 ance under the State plan.”.

12 (e) FEDERAL REIMBURSEMENT FOR OUTREACH
 13 CAMPAIGN.—Section 1903(a) of the Social Security Act
 14 (42 U.S.C. 1396b(a)) is amended—

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

17 (2) by inserting after paragraph (7) the fol-
 18 lowing new paragraph:

19 “(8) with respect to the development, imple-
 20 mentation, and evaluation of an outreach campaign
 21 to—

22 “(A) increase awareness of comprehensive
 23 tobacco cessation services covered in the State
 24 plan among—

1 “(i) individuals who are likely to be el-
2 ible for medical assistance under the
3 State plan; and

4 “(ii) clinicians and others who provide
5 services to individuals who are likely to be
6 eligible for medical assistance under the
7 State plan; and

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

11 “(i) individuals who are likely to be el-
12 ible 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 about the benefits of using com-
18 prehensive tobacco cessation services,

19 for calendar quarters occurring during the pe-
20 riod beginning on the date of the enactment of
21 this paragraph and ending on 5 years after the
22 date of enactment of this paragraph, an amount
23 equal to 90 percent of the sums expended dur-
24 ing each quarter which are attributable to such
25 development, implementation, and evaluation,

1 and for calendar quarters succeeding such pe-
 2 riod, an amount equal to Federal medical as-
 3 sistance percentage determined under section
 4 1905(b) of the sums expended during each
 5 quarter which are so attributable.”.

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

10 (1) in paragraph (1)(A), by striking “A State”
 11 and inserting “Subject to paragraph (8), a State”;
 12 and

13 (2) by adding at the end the following new
 14 paragraph:

15 “(8) NO PRIOR AUTHORIZATION PROGRAMS FOR
 16 TOBACCO CESSATION DRUGS.—A State plan may not
 17 require, as a condition of coverage or payment for
 18 a covered outpatient drug, the approval of an agent
 19 to promote smoking cessation (including agents ap-
 20 proved by the Food and Drug Administration) or to-
 21 bacco cessation.”.

22 (g) EXCLUSION OF ENHANCED PAYMENTS FROM
 23 TERRITORIAL CAPS.—Notwithstanding any other provi-
 24 sion of law, for purposes of section 1108 of the Social Se-
 25 curity Act (42 U.S.C. 1308), with respect to any addi-

1 tional amount paid to a territory as a result of the applica-
 2 tion of section 1905(bb)(2) of the Social Security Act (42
 3 U.S.C. 1396d(bb)(2))—

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

7 (2) such additional amounts shall be dis-
 8 regarded in applying such subsections.

9 (h) EFFECTIVE DATE.—The amendments made by
 10 this section shall take effect on the first day of the first
 11 fiscal year that begins on or after the date of enactment
 12 of this Act.

13 **SEC. 3. COVERAGE OF COMPREHENSIVE TOBACCO CES-**
 14 **SATION SERVICES IN CHIP.**

15 (a) REQUIRING CHIP COVERAGE OF COUNSELING
 16 AND PHARMACOTHERAPY FOR CESSATION OF TOBACCO
 17 USE.—

18 (1) IN GENERAL.—Section 2103(c)(2) of the
 19 Social Security Act (42 U.S.C. 1397cc(c)(2)) is
 20 amended by adding at the end the following new
 21 subparagraph:

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

1 (2) COUNSELING AND PHARMACOTHERAPY FOR
 2 CESSATION OF TOBACCO USE DEFINED.—Section
 3 2110(c) of the Social Security Act (42 U.S.C.
 4 1397jj(c)) is amended by adding at the end the fol-
 5 lowing new paragraph:

6 “(10) COUNSELING AND PHARMACOTHERAPY
 7 FOR CESSATION OF TOBACCO USE.—The term ‘coun-
 8 seling and pharmacotherapy for cessation of tobacco
 9 use’ means diagnostic, therapy, and counseling serv-
 10 ices and pharmacotherapy (including the coverage of
 11 prescription and nonprescription tobacco cessation
 12 agents approved by the Food and Drug Administra-
 13 tion) for the cessation of tobacco use by individuals
 14 who use tobacco products or who are being treated
 15 for tobacco use that are furnished—

16 “(A) by or under the supervision of a phy-
 17 sician; or

18 “(B) by any other health care professional
 19 who—

20 “(i) is legally authorized to furnish
 21 such services under State law (or the State
 22 regulatory mechanism provided by State
 23 law) of the State in which the services are
 24 furnished; and

1 “(ii) is authorized to receive payment
 2 for other services under this title or is des-
 3 ignated by the Secretary for this purpose
 4 which is recommended in the guideline entitled,
 5 ‘Treating Tobacco Use and Dependence: 2008
 6 Update: A Clinical Practice Guideline’ pub-
 7 lished by the Public Health Service in May
 8 2008 (or any subsequent modification of such
 9 guideline) or is recommended for the cessation
 10 of tobacco use by the U.S. Preventive Services
 11 Task Force or any additional intervention ap-
 12 proved by the Food and Drug Administration
 13 as safe and effective in helping smokers quit.”.

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

17 “(5) NO COST SHARING ON BENEFITS FOR
 18 COUNSELING AND PHARMACOTHERAPY FOR CES-
 19 SATION OF TOBACCO USE.—The State child health
 20 plan may not impose deductibles, coinsurance, or
 21 other cost sharing with respect to benefits for coun-
 22 seling and pharmacotherapy for cessation of tobacco
 23 use (as defined in section 2110(c)(10)) and prescrip-
 24 tion drugs that are covered under a State child
 25 health plan that are prescribed for purposes of pro-

1 moting tobacco cessation in accordance with the
 2 guideline specified in section 2110(c)(10)(B).”.

3 (c) EXCEPTION FROM OPTIONAL RESTRICTION
 4 UNDER CHIP PRESCRIPTION DRUG COVERAGE.—Section
 5 2103 of the Social Security Act (42 U.S.C. 1397cc) is
 6 amended by adding at the end the following new sub-
 7 section:

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

12 “(1) pregnant women when recommended in ac-
 13 cordance with the guideline specified in section
 14 2110(c)(10)(B), agents approved by the Food and
 15 Drug Administration for purposes of promoting to-
 16 bacco cessation; and

17 “(2) individuals who are eligible under the
 18 State child health plan when recommended in ac-
 19 cordance with the Guideline referred to in section
 20 2110(c)(10)(B), agents approved by the Food and
 21 Drug Administration for purposes of promoting to-
 22 bacco cessation.”.

23 (d) STATE MONITORING AND PROMOTING OF COM-
 24 PREHENSIVE TOBACCO CESSATION SERVICES UNDER
 25 CHIP.—Section 2102 of the Social Security Act (42

1 U.S.C. 1397bb) is amended by adding at the end the fol-
 2 lowing new subsection:

3 “(e) STATE MONITORING AND PROMOTING OF COM-
 4 PREHENSIVE TOBACCO CESSATION SERVICES UNDER
 5 CHIP.—A State child health plan shall include a descrip-
 6 tion of the procedures to be used by the State to monitor
 7 and promote the use of comprehensive tobacco cessation
 8 services under the State plan (including conducting an
 9 outreach campaign to increase awareness of the benefits
 10 of using such services) among—

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

14 “(2) clinicians and others who provide services
 15 to individuals entitled to medical assistance under
 16 the State child health plan.”.

17 (e) FEDERAL REIMBURSEMENT FOR CHIP COV-
 18 ERAGE AND OUTREACH CAMPAIGN.—

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

22 “(5) FEDERAL REIMBURSEMENT FOR CHIP
 23 COVERAGE OF COMPREHENSIVE TOBACCO CES-
 24 SATION SERVICES AND OUTREACH CAMPAIGN.—In
 25 addition to the payments made under paragraph (1)

1 for calendar quarters occurring during the period be-
2 ginning on the date of the enactment of this para-
3 graph and ending on 5 years after the date of enact-
4 ment of this paragraph, the Secretary shall pay—

5 “(A) an amount equal to 90 percent of the
6 sums expended during each quarter which are
7 attributable to the cost of furnishing counseling
8 and pharmacotherapy for cessation of tobacco
9 use by individuals who are eligible under the
10 State child health plan (net of any payments
11 made to the State under paragraph (1) with re-
12 spect to such counseling and pharmacotherapy);
13 plus

14 “(B) an amount equal to 90 percent of the
15 sums expended during each quarter which are
16 attributable to the development, implementa-
17 tion, and evaluation of an outreach campaign
18 to—

19 “(i) increase awareness of comprehen-
20 sive tobacco cessation services covered in
21 the State child health plan among—

22 “(I) individuals who are likely to
23 be eligible for medical assistance
24 under the State child health plan; and

1 “(II) clinicians and others who
 2 provide services to individuals who are
 3 likely to be eligible for medical assist-
 4 ance under the State child health
 5 plan; and

6 “(ii) increase awareness of the bene-
 7 fits of using comprehensive tobacco ces-
 8 sation services covered in the State child
 9 health plan among—

10 “(I) individuals who are likely to
 11 be eligible for medical assistance
 12 under the State child health plan; and

13 “(II) clinicians and others who
 14 provide services to individuals who are
 15 likely to be eligible for medical assist-
 16 ance under the State child health plan
 17 about the benefits of using com-
 18 prehensive tobacco cessation serv-
 19 ices.”.

20 (2) ADJUSTMENT OF CHIP ALLOTMENTS.—Sec-
 21 tion 2104(m) of the Social Security Act (42 U.S.C.
 22 1397dd(m)) is amended—

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

1 (B) by adding at the end the following new
 2 paragraph:

3 “(13) ADJUSTING ALLOTMENTS TO ACCOUNT
 4 FOR FEDERAL PAYMENTS FOR CHIP COVERAGE OF
 5 COMPREHENSIVE TOBACCO CESSATION SERVICES
 6 AND OUTREACH CAMPAIGN.—If a State (including
 7 the District of Columbia and each commonwealth
 8 and territory) receives a payment for a fiscal year
 9 under section 2105(a)(5), the allotment determined
 10 for the State for such fiscal year shall be increased
 11 by the amount of such payment.”.

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

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

19 (2) by adding at the end the following new sub-
 20 section:

21 “(h) NO PRIOR AUTHORIZATION PROGRAMS FOR TO-
 22 BACCO CESSATION DRUGS.—A State child health plan
 23 may not require, as a condition of coverage or payment
 24 for a prescription drugs, the approval of an agent to pro-

1 mote smoking cessation (including agents approved by the
2 Food and Drug Administration) or tobacco cessation.”.

3 (g) EFFECTIVE DATE.—The amendments made by
4 this section shall take effect on the first day of the first
5 fiscal year that begins on or after the date of enactment
6 of this Act.

7 **SEC. 4. RULE OF CONSTRUCTION.**

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

○