

# Medicaid Managed Care and Tobacco Cessation

## State Managed Care Quality Requirements Background

States are subject to federal requirements related to Medicaid Managed Care quality including 1) having a managed care **quality strategy**, 2) developing a **quality assessment and performance improvement program (QAPI)**, and 3) provisions for **external quality review (EQR)**. Additionally, as part of a comprehensive quality assessment and performance improvement program, states must require managed care plans to implement **performance improvement projects (PIPs)** with an objective to achieve improvement in the measurement of quality performance.

## Quality Strategy Reporting

For states with Medicaid Managed Care, requirements exist for developing state quality plans. As of 2024, the state Medicaid program must include a mandatory core set of measures that health plans report on for both children and adults. In 2025, the Core Set of health care quality measures for adults enrolled in Medicaid, includes the following measure as mandatory:

Name	Description	Details
<b>CMIT # 432</b> Medical Assistance with Smoking and Tobacco Use Cessation (survey)	<ul style="list-style-type: none"> <li>• <b>Advising those who smoke or use Tobacco to Quit.</b> A rolling average represents the % of members 18 years of age and older (as of December 21 of the measurement year) who currently smoke or use tobacco and who received advice to quit during the measurement year.</li> <li>• <b>Discussing Cessation Medications.</b> A rolling average represents the percentage of members 18 years of age and older (as of December 21 of the measurement year) who currently smoke or use tobacco and who discussed or were recommended cessation medications during the measurement year.</li> <li>• <b>Discussing Cessation Strategies.</b> A rolling average represents the percentage of members 18 years of age and older (as of December 21 of the measurement year) who currently smoke or use tobacco and who discussed or were provided cessation methods or strategies during the measurement year.</li> </ul>	Mandatory Measure in the 2025 <a href="#">Adult Core Set</a> of healthcare quality measures for adults enrolled in Medicaid

## Additional Tobacco Cessation Quality Measures

Additional metrics are available to assess tobacco use and cessation aside from those applicable to state quality plans. Some that could be measured through clinical data include:

Name	Description	Details
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<b>CMIT ID # 5792</b> Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received tobacco cessation intervention if identified as someone who uses tobacco. Three rates are reported: <ol style="list-style-type: none"> <li>Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months</li> <li>Percentage of patients aged 18 years and older who were identified as a someone who uses tobacco who received tobacco cessation intervention</li> <li>Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received tobacco cessation intervention if identified as someone who uses tobacco.</li> </ol>	Reported by Clinicians (groups/practices)
<b>CMIT ID #2274</b> Tobacco Use and Help with Quitting Among Adolescents	The percentage of adolescents 12 to 20 years of age with a primary care visit during the measurement year for whom tobacco use status was documented and received help with quitting if identified as someone who uses tobacco.	Reported by Clinicians (groups practices) <i>This measure was previously required in the Medicare Physician Quality Reporting System programs and has since been removed</i>

## Managed Care Contract Requirements

Public Health can also consider the opportunity to influence Managed Care contracts to incentivize health plans and providers to improve tobacco cessation service provision to Medicaid members. Consider recommending revisions to MCO contracts to include some of the following requirements:

1. Submission of annual quality measures on tobacco cessation efforts
2. Submission of a yearly Tobacco Cessation Plan
3. Provider training on tobacco exposure, brief intervention, and standard of care services

For additional ideas on how to support partnerships with Medicaid to support tobacco cessation efforts, visit this 6|18 resource: <https://www.618resources.chcs.org/priority-conditions/reduce-tobacco-use/>