

National Action Plan for Tobacco Cessation Fact Sheet

- In August, 2002, HHS Secretary Tommy Thompson asked Dr. Michael Fiore to Chair the Subcommittee on Cessation of the Interagency Committee on Smoking and Health (ICSH). The ICSH is a U.S. legislatively mandated committee chaired by the Surgeon General.
- Sec. Thompson charged the 16-member subcommittee with the responsibility of developing a set of bold, science-based action steps that the Federal government could undertake that would result in a dramatic reduction in tobacco use rates in America.
- The subcommittee met on five occasions from 10/1/02 to 1/16/03 including three regional meetings in D.C., Denver, and Chicago where more than 200 individuals provided testimony either in-person or written form.
- The Subcommittee's report is a comprehensive plan that provides both government programs and public/private partnerships.
- February 11, 2003, Dr. Fiore presented the report to the full Interagency Committee on Smoking and Health in Washington.
- The response of Surgeon General Carmona, the full committee and the public was overwhelmingly positive. After discussion, the full committee unanimously endorsed sending the report to Secretary Thompson. The report was presented to Secretary Thompson in July, 2003.
- The recommendations from the Report, forming the National Action Plan for Tobacco Cessation, form the basis for an article, published February 3, 2004 in the *American Journal of Public Health*.

The Action Plan

The goal of the plan is to:

- Ultimately prevent approximately three million premature deaths.
- Help five million Americans cease tobacco use within one year.

The Recommendations:

- **Establish a federally funded National Tobacco Quitline network** that will provide universal access to evidence-based counseling and medications for tobacco cessation. This quitline would provide a national portal to available state or regionally managed quitlines.
- **Launch an ongoing, extensive paid media campaign** to help Americans quit using tobacco.

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- **Include evidence-based counseling and medications for tobacco cessation in benefits provided to all Federal beneficiaries and in all federally funded healthcare programs.** This includes more than 100 million Americans.
- **Invest in a new broad and balanced research agenda** (basic, clinical, public health, translational, dissemination) to achieve future improvements in the reach, effectiveness and adoption of tobacco dependence interventions. The research will have two primary goals—improve the successful cessation rate to above 50 percent and eliminate the disparities in tobacco use.
- **Invest in training and education for healthcare providers.** Ensure that all clinicians in the United States have the knowledge, skills and support systems necessary to help their patients quit tobacco use.
- **Establish a Smokers' Health Fund by increasing the Federal Excise Tax on cigarettes by \$2.00 per pack** (from the current rate of \$0.39 to \$2.39) with a similar increase in the excise tax on other tobacco products. **At least 50% of the new revenue generated by this tax increase (at least \$14 billion of the estimated \$28 billion generated) should be earmarked to pay for the components of this action plan.**

The plan also includes public/private partnership recommendations:

- **The Secretary will challenge and engage all insurers, employers, and purchasers that pay for or provide health coverage to include barrier-free coverage for evidence-based tobacco dependence treatment (counseling and pharmacotherapy) as part of the basic benefits package offered to all individuals and groups seeking insurance coverage.**
- **The Secretary will advocate for systems-level changes and quality improvement strategies to expand the delivery of evidence-based tobacco dependence treatments and engage decision-makers in the public and private sectors to achieve those aims.**
- **The Secretary will work in partnership with national quality assurance and accreditation organizations and other healthcare stakeholders to ensure that provision of evidence-based tobacco dependence treatment is established as a standard of care and is measured uniformly in all healthcare delivery settings.**
- **The Secretary will initiate and support partnerships between DHHS and community organizations (e.g., schools, employers, voluntary health agencies, and faith-based organizations) to put in place programs and policies that foster tobacco users' motivation to quit and success in quitting.**

Since the plan was submitted to HHS and published in AJPH:

- **On February 3, 2004, the Secretary announced plans to establish a network of smoking cessation quitlines, with a single toll-free number**
- **The Centers for Medicare & Medicaid Services (CMS) are now covering counseling services for Medicare beneficiaries who want to quit smoking.**
- **In addition, beneficiaries will be covered for smoking cessation medications under the new Medicare drug benefit. That benefit goes into effect in January, 2006.**