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November 5, 2009

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
Washington, DC 20515

Dear Madam Speaker:

The Campaign for Tobacco-Free Kids applauds and fully endorses the Affordable Health Care for America Act, H.R. 3962, for recognizing the important role prevention must play in a reformed health care system. A national commitment to prevention can save lives, reduce disease, and lower health care costs and we urge the House of Representatives to quickly pass H.R. 3962.

Tobacco cessation and prevention are vitally important parts of health reform. The inclusion of cessation and prevention strategies will help tobacco users to quit and help prevent young people from beginning this deadly addiction. Tobacco use takes a devastating toll on our nation's health and economy. Tobacco-related disease causes more than 400,000 deaths and \$96 billion in health care costs each year. More than 43 million Americans currently use tobacco products. Fortunately, there are proven ways to prevent and reduce tobacco use. Research has demonstrated conclusively that cessation programs and investments in tobacco prevention reduce smoking and produce substantial health care cost savings over the long term. During this time of increasing health care costs and economic uncertainty, preventing tobacco use and helping more tobacco users to quit is a critical investment.

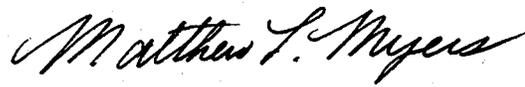
The Affordable Health Care for America Act appropriately promotes both clinical- and community-based prevention. Insurance coverage – in both private health plans and public programs – should cover services recommended by the U.S. Preventive Services Task Force (USPSTF) with a grade of A or B. The bill's use of the USPSTF standard will ensure that health benefits plans offered within and outside the exchange and state Medicaid programs will cover comprehensive tobacco cessation services, including FDA-approved medications and counseling sessions. While breaking an addiction to nicotine is difficult, access to these recommended services has been shown to increase the proportion of smokers who use cessation services, attempt to quit, and quit successfully. The bill also takes the additional step of enhancing access to these covered services by prohibiting cost-sharing requirements for them.

Community-based efforts to reduce and prevent tobacco use will benefit from the development of a national prevention strategy and new funding available through the Public Health Investment Fund in H.R. 3962. Programs that follow the Center for Disease Control and Prevention's Best Practices for Comprehensive Tobacco Control Program, which include community based programs and public education campaigns, can quickly and substantially reduce tobacco use, save lives, and cut smoking-caused costs. In California, adult smoking rates were reduced by 35 percent (from 22.7 percent in 1988 to 13.8 percent in 2007) after implementation of its Tobacco Control Program. A recent study found that California's program

saved \$86 billion in personal health care costs and prevented 3.6 billion packs of cigarettes from being smoked between 1989 and 2004. Successful tobacco prevention and cessation programs have also been implemented in Maine, New York, Washington State and elsewhere. Unfortunately, few states are adequately investing in tobacco prevention. In fact, no state committed the level of resources recommended by the CDC in fiscal year 2009, and that is why the potential funding in your bill is so important.

We are pleased with the legislation's emphasis on prevention and its recognition that prevention is an essential element of health reform. When applied to tobacco, the clinical- and community-based prevention provisions in the bill will help tobacco users quit and prevent others from beginning to use these deadly products.

Sincerely,

A handwritten signature in cursive script that reads "Matthew L. Myers".

Matthew L. Myers
President