



February 28, 2009

Committee on Human Services
Representative John Mizuno, Chair
Representative Tom Brower, Vice Chair

Committee on Health
Representative Ryan I. Yamane, Chair
Representative Scott Y. Nishimoto, Vice Chair

Hearing:

9:00 A.M., Monday, March 2, 2009
Hawaii State Capitol, Room 329

RE: HR36 & HCR45, Department of Human Services study on the feasibility of implementing a smoking cessation counseling benefit for Quest beneficiaries.

Testimony in Strong Support

Chairs Mizuno and Yamane and members of the joint committees. My name is George Massengale and I am here today on behalf of the American Cancer Society Hawaii Pacific Inc. Thank you for the opportunity to testify in strong support of HR36 & HCR45, requesting a study from DHS to implement a smoking cessation counseling benefit.

The American Cancer Society Hawaii Pacific Inc., was founded in 1948, and is a community-based, voluntary health organization dedicated to eliminating cancer as a major health problem by preventing cancer, saving lives, and diminishing suffering from cancer, through research, education, advocacy, and service. This mission includes advocating for effective tobacco control measures to reduce and prevent smoking by our youth, adults and disparate population which are impacted most by smoking and secondhand smoke.

We would note the following facts from the Centers for Disease Control (CDC).

- Tobacco use costs the United States \$193 billion each year in health care costs and lost productivity.
- An estimated 14% of Medicaid costs are attributable to tobacco use.
- In 2006, approximately 35% of Medicaid recipients smoked cigarettes.
- Tobacco-dependence treatments (including FDA-approved pharmacotherapy and individual, group, and telephone counseling) are highly cost-effective, even cost-saving in some populations.

What impacts smoking cessation most is a combination of pharmacotherapy with counseling. Currently, 17 states cover some form of tobacco-cessation counseling for their entire Medicaid population (Quest in Hawaii), and another 10 states cover counseling services for pregnant women only. In addition, Medicare covers up to eight face-to-face visits during a 12 month period.

The U.S. Departments of Health & Human Services' U.S. Preventative Services Task Force (USPSTF) strongly recommends that all pregnant women who use tobacco undergo pregnancy-tailored counseling to increase abstinences. They further noted that both the unborn infant and expectant mother will likely gain substantial health benefits.

The Society strongly supports these resolutions and urges both committees to pass them onto the House Finance Committee.

Mahalo for giving me the opportunity to provide testimony here today.

Sincerely,

A handwritten signature in black ink, appearing to read 'G. Massengale', written in a cursive style.

George Massengale, JD
Director of Government Relations

To: Honorable John Mizuno
Honorable Ryan Yamane

From: Lin Joseph
Director of Program Services
March of Dimes Hawaii Chapter

Re: In strong support of
HR 36/HCR 45

Hearing: Thursday, March 2, 2009, 9:00am
Conference Room 329, State Capitol

Chair Mizuno, Vice Chair Yamane, Members of the Committee:

I am writing to express strong support for HR36/HCR45, *Requesting the Department of Human Services to Study the Feasibility of Implementing a Smoking Cessation Benefit to Hawaii Quest Beneficiaries.*

For 70 years, the March of Dimes has been a leader in improving the health of pregnant women and children. Our mission is to *improve the health of babies by preventing birth defects, premature birth, and infant mortality.* Smoking represents a dangerous health hazard to unborn babies, infants and children; it can damage developing organs, such as the lungs and brain. Environmental exposure to tobacco products during pregnancy and after birth increases the risk of sudden infant death syndrome (SIDS), a key contributor to infant mortality.

One in eight babies born in Hawaii is born premature. According to the U.S. Surgeon General's 2006 Report, *The Health Consequences of Involuntary Exposure to Tobacco Smoke*, exposure to secondhand smoke by non-smoking pregnant women may lead to premature birth. The Institute of Medicine reports that in 2005, the annual societal economic cost (medical, educational, and lost of productivity) from birth through early childhood associated with preterm birth in the United States was at least \$26.2 billion. During that same year the average first year costs, including both inpatient and outpatient care, were about 10 times greater for preterm (\$32,325) than for term infants (\$3,325). The average length of stay was 9 times as long for a preterm infant (13 days) compared with an infant born at term (1.5 days). Every dollar spent on smoking cessation treatment for pregnant smokers is estimated to save three dollars in neonatal intensive care costs.

According to the Centers for Disease Control and Prevention (CDC), pregnant women who rely on Medicaid for their health insurance are more likely than other pregnant women to smoke. Twenty-seven states provide smoking cessation counseling through Medicaid. Hawaii is not one of them.

March of Dimes encourages members of the Human Services committee to join us in ensuring smoking cessation benefits are available for pregnant women.