Attachment 2B. Summary of Public Comments and CDC Response

Comment #1: Request Received in Response to Publication of the 60-day Federal Register Notice:

From: Holdridge, Elaine [mailto:ElaineHoldridge@oasas.state.ny.us]

Sent: Thursday, September 25, 2008 7:43 AM

To: OMB-Comments (CDC)

Subject: Federal Register/Vol. 73, No. 187/Thursday, September 25, 2008/Notices - Proposed

Project: State Medicaid Tobacco Coverage Survey (OMB No. 0920-0691)

Good morning,

I am interested in reviewing a copy of the data collection plans and instruments for the State Medicaid Tobacco Coverage Survey (OMB No. 0920-0691) listed in today's Federal Register.

I have copied the notice below for your information. Thank you for your assistance.

Elaine

Elaine Holdridge

Grants-In-Aid Program Assistant 2 Bureau of Grants Management and Federal Policy NYS Office of Alcoholism and Substance Abuse Services 1450 Western Avenue Albany, NY 12203

Telephone: (518) 485-0510

E-mail: *ElaineHoldridge@oasas.state.ny.us*

CDC Response to Comment #1:

Copies of the requested materials were sent to the requestor via email.

Comment #2 and CDC's response are included on the following pages of this attachment.



Michael D. Maves, MD, MBA, Executive Vice President, CEO

November 24, 2008

Ms. Maryam Daneshvar Acting Reports Clearance Officer Centers for Disease Control and Prevention 1600 Clifton Road, MS-D74 Atlanta, GA 30333

RE: Proposed Data Collection – State Medicaid Tobacco Coverage Survey (OMB No. 0920-0691)–Reinstatement; 73 Fed. Reg. 55515 (September 25, 2008)

Dear Ms. Daneshvar:

On behalf of the physician and medical student members of the American Medical Association (AMA), I am writing in response to the Centers for Disease Control and Prevention's (CDC) request for public comment on data collections associated with state Medicaid tobacco coverage. The AMA supports the continuation of this survey and does not believe that completing this survey is a burden for state officials.

Medicaid provides health coverage for low-income children and adults, medical and long-term care coverage for people with disabilities, and assistance with health and long-term care expenses for low-income seniors. Nearly 59 million people rely on Medicaid services and children represent half of those covered by Medicaid.

Medicaid recipients smoke at higher rates than the general public, posing a tremendous public health problem. Approximately 35 percent of adult Medicaid recipients smoke compared to 21 percent of the general adult population 18 and older. Tobacco use remains the number one cause of preventable death in the United States. Exposure to secondhand smoke ranks third in causes of preventable death. One in four children under the age of 11 is exposed to secondhand smoke, primarily by parental smoking. Each year, tobacco use in the United States results in \$193 billion in health-care costs and lost productivity including an estimated 14 percent of Medicaid costs.

The AMA supports requiring state Medicaid programs to provide evidence-based approaches for smoking cessation and nicotine withdrawal. Treating tobacco dependence requires a comprehensive and consistent approach. Currently each state defines coverage independently without clearly defined definitions. This survey will assist policy analysts in

developing uniformity among states to ensure Medicaid recipients receive evidenced-based smoking cessation services. The CDC survey is also an important tool in evaluating the states' progress in achieving the 2010 National Health Objectives and Healthy People 2010 goals.

Sincerely,

Michael D. Maves, MD, MBA



Centers for Disease Control and Prevention (CDC) Atlanta GA 30341-3724

January 5, 2009

Michael D. Maves, MD, MBA Executive Vice President, CEO American Medical Association 515 North State Street Chicago, Illinois 60610

Dear Dr. Maves,

The CDC Office on Smoking and Health sincerely appreciates the AMA support for the state Medicaid Survey recently posted in the Federal Register. We have been conducting this survey annually in conjunction with the University of California Berkeley, Center for Health and Public Policy Studies for the past several years. During this time there has been some movement toward more comprehensive coverage for tobacco dependence treatment under state Medicaid programs. There is a Healthy People 2010 objective stating the need for comprehensive coverage for low income individuals. Having the data has helped the states to be more assertive in moving their policies forward.

The survey has also provided an opportunity to apply an evidence-based approach to evaluating coverage which will help in creating a greater level of uniformity across states.

Sincerely,

CAPT Matthew McKenna, MD, MPH

Director

Office on Smoking and Health

Centers for Disease Control and Prevention