



Provider Relations Outreach Specialist

Physician/Independent Lab/CRNA/Radiation Therapy Center

Section II

257.000 Tobacco Cessation Products and Counseling Services

2-1-20

Tobacco cessation products either prescribed or initiated through statewide pharmacist protocol are available without prior authorization (PA) to eligible Medicaid beneficiaries. Additional information can be found on the [DHS Contracted Pharmacy Vendor website](#) or in the [Prescription Drug Program Prior Authorization Criteria](#).

- A. Physician providers may participate by prescribing covered tobacco cessation products. Reimbursement for tobacco cessation products is available for all prescription and over the counter (OTC) products and subject to be within U.S. Food and Drug Administration prescribing guidelines.
- B. Counseling by the prescriber is required to obtain initial prior authorization (PA) coverage of the products. Counseling consists of reviewing the Public Health Service (PHS) guideline-based checklist with the patient. The prescriber must retain the counseling checklist in the patient records for audit. [View or Print the Arkansas Be Well Referral Form](#).
- C. Counseling procedures do not count against the twelve (12) visits per state fiscal year (SFY), but they are limited to no more than two (2) 15-minute units and two (2) 30-minute units for a maximum allowable of four (4) units per SFY.
- D. Counseling sessions can be billed in addition to an office visit or EPSDT. These sessions do not require a PCP referral.
- E. If beneficiary is under the age of eighteen (18), and the parent/legal guardian smokes, he or she can be counseled as well, and the visit billed under the minor's beneficiary Medicaid number. The provider cannot prescribe meds for the parent under the child's Medicaid number. A parent/legal guardian session will count towards the four (4) counseling sessions limit described in section C above.
- F. Additional prescription benefits will be allowed per month for tobacco cessation products and will not be counted against the monthly prescription benefit limit. Tobacco cessation products are not subject to co-pay.
- G. Arkansas Medicaid will provide coverage of prescription and over the counter (OTC) smoking/tobacco cessation covered outpatient drugs for pregnant women as recommended in "Treating Tobacco Use and Dependence - 2008 Update: A Clinical Practice Guideline" published by the Public Health Service in May 2008 or any subsequent modification of such guideline.
- H. Refer to Section 292.900 for procedure codes and billing instructions.



Provider Relations Outreach Specialist

292.900 Tobacco Cessation Counseling Services

2-1-20

A. Tobacco cessation counseling and products are covered services to eligible Medicaid beneficiaries. Tobacco cessation products either prescribed or initiated through statewide pharmacist protocol are available without prior authorization (PA) to eligible Medicaid beneficiaries. Additional information can be found on the [DHS Contracted Pharmacy Vendor website](#) or in the [Prescription Drug Program Prior Authorization Criteria](#)

**(...) This symbol, along with text in parentheses, indicates the Arkansas Medicaid description of the service. When using a procedure code with this symbol, the service must meet the indicated Arkansas Medicaid description.

Current Procedure Code	Current Modifier	Arkansas Medicaid Description
99406*	SE	** (Smoking and tobacco use cessation counseling visit; intermediate, 15-minutes)
99406*	CG	** (Smoking and tobacco use cessation counseling visit, intermediate, 15-minutes provided to parents of children birth through twenty (20) years of age)
99407*	SE	** (Smoking and tobacco use cessation counseling visit; intensive, 30-minutes)
99407*	CG	** (Smoking and tobacco use cessation counseling visit, intensive, 30-minutes provided to parents of children birth through twenty (20) years of age)

* Exempt from PCP referral.

B. Two (2) Counseling visits per state fiscal year.

C. Health education can include but is not limited to tobacco cessation counseling services to the parent/legal guardian of the child.

D. Can be billed in addition to an office visit or EPSDT.

E. Sessions do not require a PCP referral.

F. If the beneficiary is under the age of eighteen (18), and the parent/legal guardian smokes, he or she can be counseled as well, and the visit billed under the minor's beneficiary Medicaid number. The provider cannot prescribe meds for the parent under the child's Medicaid number. A parent/legal guardian session will count toward the four (4) counseling session limit described in section C above.

G. The provider must complete the counseling checklist and place in the patient records for audit. [View or Print the Arkansas Be Well Referral Form](#)



Provider Relations Outreach Specialist

Oral surgeons must use procedure code **D9920** for one 15-minute unit and procedure code **D1320** for one 30-minute unit when filing claims on the American Dental Association (ADA).