



Joint Testimony Senate Bill 798
Finance Committee
Budget and Taxation Committee
March 10, 2026
Support

Chair Beidle, Chair Guzzone, Vice-Chair Hayes, Vice-Chair Rosapepe and Members of the Committees:

Thank you for the opportunity to provide comments on Senate Bill 798, Public Health- Maryland Medical Assistance Program – Tobacco Cessation sponsored by Senator Lam. The American Lung Association, American Heart Association and the American Cancer Society Cancer Action Network **support** this bill as a way to ensure that all Maryland Medicaid enrollees have access to the fully array of evidence-based treatments to quit tobacco.

Tobacco use remains the leading cause of preventable death in the United States, killing an estimated 490,000 Americans and 7,490 Marylanders each year.¹ However, nearly seven out of ten people who smoke want to quit.² Senate Bill 798 would ensure that people who smoke who are enrolled in Medicaid would have access to a comprehensive, barrier-free quit smoking benefit including all Food and Drug Administration (FDA) approved medications and all three forms of counseling proven to help people quit.

Nearly 25% of Marylanders enrolled in Medicaid smoke³ and according to the American Lung Association's State of Tobacco Control⁴ healthcare costs attributed to smoking is \$2.7 billion annually.

Quitting smoking is effective at reducing the risk of death and disease, and most Medicaid enrollees who smoke want to quit. Healthcare coverage of all evidence-based quit tobacco treatment without barriers to access leads to higher rates of quitting and saves money. Maryland could save \$53.6 million in Medicaid costs the year following a one percent decrease of the smoking rate.⁵

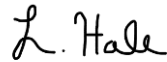
Maryland's current Medicaid coverage of quit tobacco treatments varies and some enrollees face barriers to access including prior authorizations and step-therapy requirements. All ten treatments are considered first line treatments, with many people who use tobacco going through either or more quit attempts before they quite for good – often having to try different treatments to ultimately find the one that will be successful. Senate Bill 798 seeks to remedy gaps in coverage and ensure all Maryland enrollees have barrier-free access to all FDA-approved medications and all three forms of counseling proven to help people quit tobacco.

The American Lung Association, American Heart Association and the American Cancer Society Cancer Action Network thanks the Maryland General Assembly for their continued commitment to the health and wellbeing of the residents of Maryland. The American Lung Association, American Heart Association and the American Cancer Society Cancer Action Network support Senate Bill 798 which will ensure barrier free access to all FDA-approved treatments to quit tobacco. We encourage swift action to move the bill out of committee and passage by the General Assembly.

Sincerely,



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¹ U.S. Department of Health and Human Services. Eliminating Tobacco-Related Disease and Death: Addressing Disparities—A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2024.

² VanFrank B, Malarcher A, Cornelius ME, Schechter A, Jamal A, Tynan M. Adult Smoking Cessation — United States, 2022. *MMWR Morb Mortal Wkly Rep* 2024; 73:633–641. DOI: <http://dx.doi.org/10.15585/mmwr.mm7329a1>

³ Glantz SA. Estimation of 1-Year Changes in Medicaid Expenditures Associated With Reducing Cigarette Smoking Prevalence by 1%. *JAMA Netw Open*. 2019;2(4):e192307. doi:10.1001/jamanetworkopen.2019.2307

⁴ American Lung Association, State of Tobacco Control Report. 2026. Maryland | State of Tobacco Control | American Lung Association

⁵ Glantz SA. Estimation of 1-Year Changes in Medicaid Expenditures Associated With Reducing Cigarette Smoking Prevalence by 1%. *JAMA Netw Open*. 2019;2(4):e192307. doi:10.1001/jamanetworkopen.2019.2307