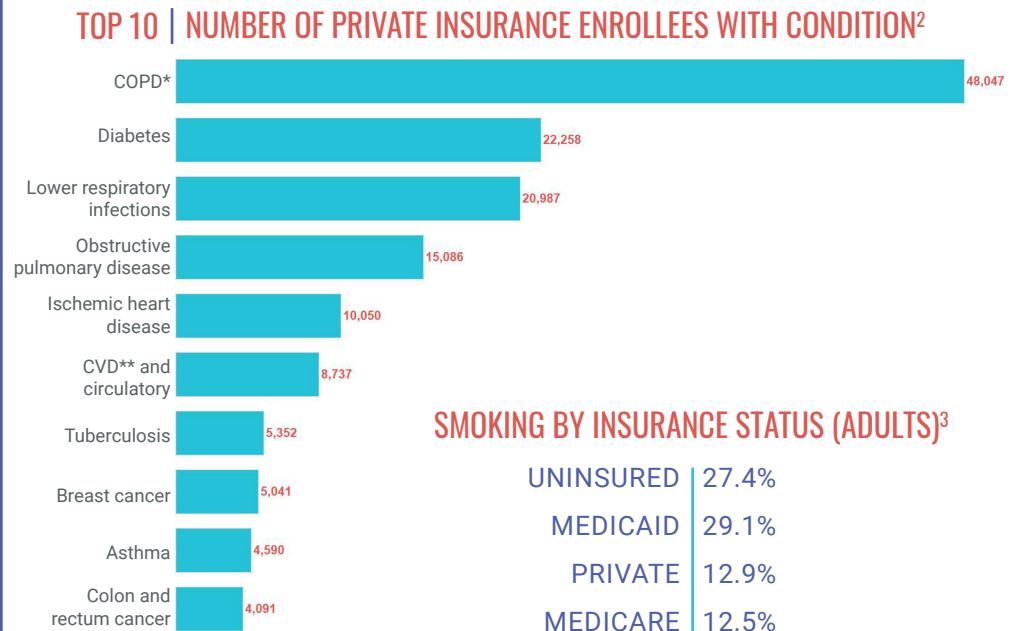


SMOKING-ATTRIBUTABLE COSTS

Medicaid and Private Insurance

- In January, the Arkansas Center for Health Improvement released an estimate of smoking-attributable costs to Medicaid of \$795 million annually.
- The estimate used data from the Arkansas All-Payer Claims Database (APCD), updating a previous estimate from the Campaign for Tobacco-Free Kids of \$293.1 million annually.
- Because of interest from the private sector, ACHI developed an estimate of smoking-attributable costs in the private insurance market in Arkansas for individuals ages 30–65 in the APCD.¹
 - The estimate does not account for smoking-attributable costs associated with pregnancy-related conditions, pre-term delivery, neonatal care, or childhood conditions triggered by smoking.
 - The estimate does not include costs for employers with self-funded health insurance plans.
- To address smoking-attributable costs, large employers including state agencies, higher education institutions, and municipalities, are incentivizing employees to quit smoking through tiered health insurance premiums and other programs.



¹Individuals with private insurance coverage ages 30–65 with a smoking-attributable condition were identified.
²Enrollees may have more than one condition but were only attributed to the condition with the highest smoking-attributable risk.
³Xu, X., et al., Annual healthcare spending attributable to cigarette smoking: an update. American Journal of Preventive Medicine. 2015. 48(3): pp. 326–333.
 *Chronic obstructive pulmonary disease
 **Cardiovascular disease



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