

Adult Tobacco & Nicotine Use and Cessation

INTRODUCTION AND BACKGROUND



This infographic is one in a series focused on tobacco and nicotine use and cessation activities among Medicaid and Children’s Health Insurance Program (CHIP)

beneficiaries. Cigarette smoking causes cancer, heart disease, chronic obstructive pulmonary disease (COPD), and many other serious health problems.¹ Providing adults who use tobacco with access to evidence-based tobacco cessation treatments can reduce morbidity and mortality from cancers and other tobacco-related diseases and reduce Medicaid costs.²

Throughout this infographic, the term “adults” refers to individuals age 18 and older. The term “tobacco products” includes all the following: cigarettes, cigars, and smokeless tobacco products (including nicotine pouches). The term “nicotine vaping products” includes e-cigarettes and other electronic vaping products. Exhibit titles note any cases where the analysis includes a narrower set of products (for example, cigarettes only). All exhibits assess the use of tobacco products separately from the use of nicotine vaping products, although some individuals may use both types of products.

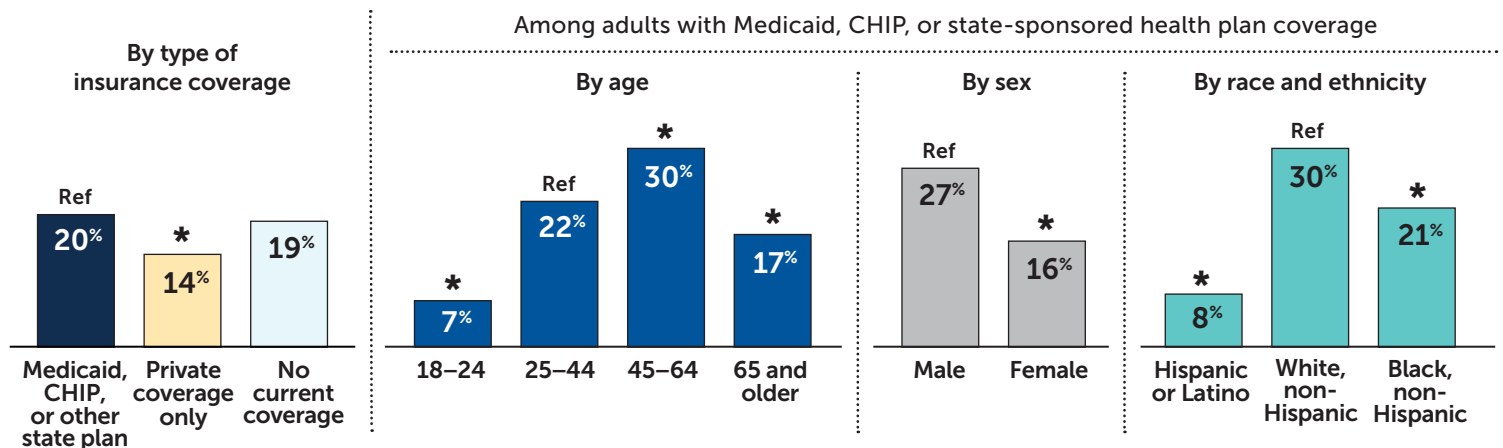
TOBACCO AND NICOTINE VAPING PRODUCT USE AMONG ADULTS



Key Findings

- Significantly higher percentages of adults with Medicaid, CHIP, or state-sponsored health plan coverage reported using tobacco products or nicotine vaping products every day or some days, when compared to adults with private coverage.
- Among adults with Medicaid, CHIP, or state-sponsored health plan coverage, women reported using tobacco products every day or some days at significantly lower rates than men. However, there was no significant difference between men and women in their use of nicotine vaping products.

Percentage of Adults Who Reported Using Tobacco Products Every Day or Some Days, 2024³

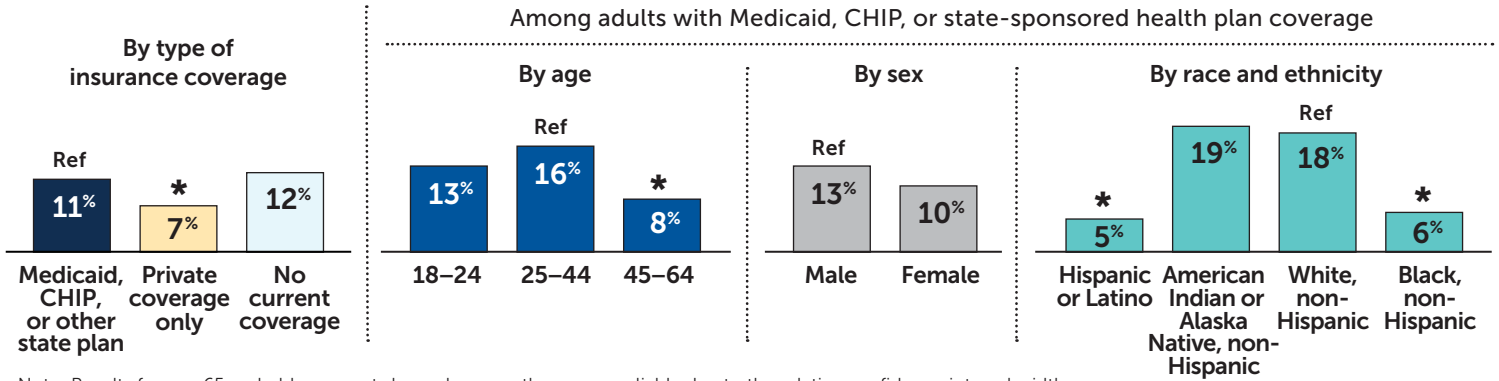


Methods Note for Survey Data

Statistical significance testing of survey-based analyses was conducted using a two-sided t-test ($p < 0.05$). Significance for each measure is affected by survey design, sample size, and other factors. For each exhibit, a reference group was identified (indicated by “Ref” in the exhibit). The rate for each additional subgroup shown in the exhibit was compared to the rate for the reference group.

* indicates that the subgroup rate was significantly different from the rate for the reference group. If the subgroup rate was not significantly different from the rate for the reference group, no symbol is included.

Percentage of Adults Who Reported Using Nicotine Vaping Products Every Day or Some Days, 2024³



Note: Results for age 65 and older are not shown because they are unreliable due to the relative confidence interval width. Statistical significance for this age group was not assessed.

TOBACCO CESSATION TREATMENT AND INTERVENTIONS AMONG ADULTS

Evidence-based tobacco cessation treatments include individual, group, and telephone behavioral counseling and seven Food and Drug Administration (FDA)-approved medications (including nicotine replacement medications and pill medications [varenicline and bupropion]). The U.S. Preventive Service Task Force has given all these treatments a “Grade A” recommendation for their use in the adult population, the highest level of recommendation.⁴ All these services can be covered by Medicaid and CHIP. States must cover medications that are approved by the FDA for tobacco cessation—such as varenicline—if the manufacturer of the medication has entered into a Medicaid drug rebate agreement. State Medicaid programs may elect to cover over-the-counter nicotine replacement therapy products, when prescribed by professionals authorized to do so under state laws and regulations.⁵

MEDICAID- AND CHIP-FUNDED TREATMENT



Key Finding

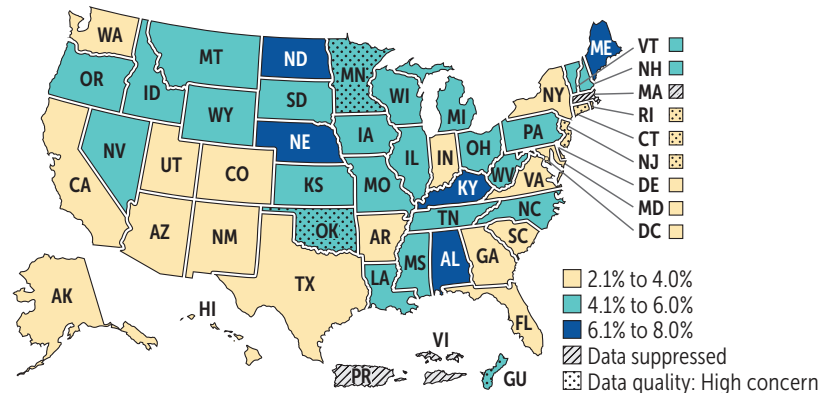
The percentage of adult beneficiaries who received any Medicaid- or CHIP-funded treatment for tobacco use disorder varies by state, with percentages ranging from 2.1 to 7.3 percent in 2023.

2.3 Million

adult beneficiaries received Medicaid- or CHIP-funded treatment for tobacco use disorder in 2023. This represents about 3.9% of adult beneficiaries.⁶



Percentage of Adult Medicaid and CHIP Beneficiaries Treated for Tobacco Use Disorder by State, 2023⁶



Methods Notes

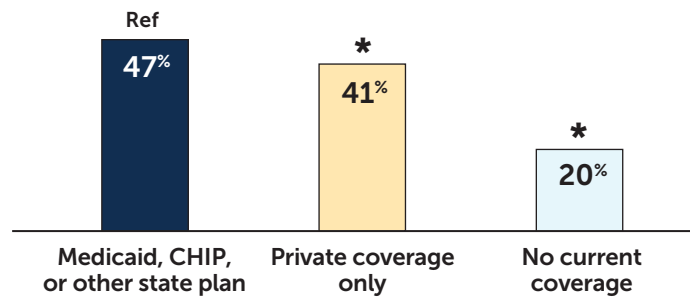
Findings for this section are based on Medicaid and CHIP claims data from 52 states and territories without major data quality concerns. The denominator for all exhibits is adults receiving full or comprehensive Medicaid or CHIP benefits for at least one day in 2023. The numerator includes adults with full or comprehensive benefits who received Medicaid-funded treatment for tobacco use disorder in 2023, based on the presence of qualifying service claim(s). The number of beneficiaries receiving treatment for tobacco use disorder should not be considered to reflect the number in need of treatment.



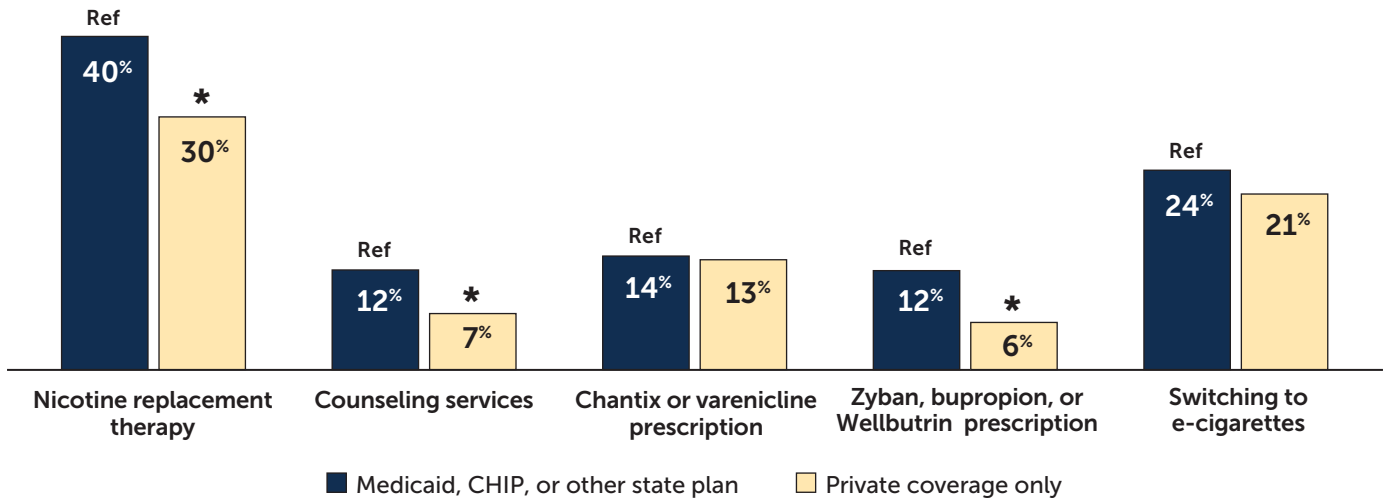
Key Findings

- Adults with Medicaid, CHIP, or other state-sponsored health plan coverage reported receiving a tobacco cessation intervention from a health care provider at a significantly higher rate than adults with private or no current coverage.
- Adults with Medicaid, CHIP, or other state-sponsored health plan coverage reported using nicotine replacement therapy, counseling services, and bupropion prescriptions to attempt to quit smoking at significantly higher rates than adults with private coverage.

Percentage of Adult Cigarette Smokers Who Reported That They Were Advised by a Health Care Provider about Ways to Stop Smoking or Prescribed Medication to Help Them Quit in the Past 12 Months, 2024³



Quit Methods Reported by Adult Cigarette Smokers Who Tried to Quit Smoking Cigarettes in the Past 12 Months, 2022³



Note: Switching to e-cigarettes is not an evidence-based strategy for tobacco cessation in adults.⁴

Methods Notes

All exhibits in this section are based on beneficiary-self report and focus on cigarette smoking cessation. The exhibits use data from 2022 and 2024, reflecting the most recent available data for each analysis. For each insurance type, there was no significant difference between the percentage of adults who reported receiving a tobacco cessation intervention from a health care provider in 2022 and the percentage who reported receiving an intervention in 2024.

1. U.S. Department of Health and Human Services. 2024. *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. Available at: <https://www.hhs.gov/sites/default/files/2024-sgr-tobacco-related-health-disparities-full-report.pdf>.
2. National Cancer Institute (NIH). April 2025. Medicaid Insurance Coverage of Tobacco Cessation Treatments. Available at: https://progressreport.cancer.gov/prevention/tobacco/medicaid_coverage.
3. Based on Mathematica analysis of National Health Interview Survey (NHIS), 2022 and 2024 Sample Adult Interview public use files. The NHIS is a nationally representative survey of the civilian noninstitutionalized U.S. population (50 states and DC). The Medicaid recode variable used for these analyses includes individuals who report coverage through Medicaid or other state-sponsored health plans including CHIP at the time of the survey, either alone or in combination with another type of coverage. Results for individuals who reported Medicare or other government coverage, but no Medicaid coverage, at the time of the survey are not included in this infographic. Data on race and Hispanic/Latino origin are presented in the greatest detail possible considering the quality of the data, the amount of missing data, and the number of observations. The Medicaid and CHIP total includes race and origin groups not shown separately because the data do not meet criteria for statistical reliability, data quality, or confidentiality.
 - Exhibit notes for page 3, *Percentage of Adult Cigarette Smokers Who Reported That They Were Advised by a Health Care Provider about Ways to Stop Smoking or Prescribed Medication to Help Them Quit in the Past 12 Months*: The denominator for this measure includes adults age 18 and older who reported that: (1) they currently smoke cigarettes every day or some days, OR (2) they stopped smoking cigarettes in the past 12 months. Note that the *Medical Assistance With Smoking and Tobacco Use Cessation: Age 18 and Older* (MSC-AD) Adult Core Set measure provides additional data related to tobacco cessation interventions in the Adult Medicaid population. State performance and additional information about this measure are available at <https://www.medicaid.gov/medicaid/quality-of-care/core-set-data-dashboard/welcome>.
 - Exhibit notes for page 3, *Quit Methods Reported by Adult Cigarette Smokers Who Tried to Quit Smoking Cigarettes in the Past 12 Months*: The denominator for this measure includes adults age 18 and older who reported that: (1) they currently smoke cigarettes every day or some days, AND (2) they stopped smoking for more than one day during the past 12 months, because they were trying to quit smoking. Percentages do not sum to 100% because individuals can report more than one quit method, or no quit method. "Nicotine replacement therapy" includes nicotine patches, nicotine gum or lozenges, and nicotine nasal sprays or inhalers. "Counseling services" includes one-on-one counseling; support received through a telephone help line; and counseling received through a stop smoking clinic, class, or support group. Results for individuals who reported no health insurance coverage at the time of the survey are not presented since they do not meet criteria for statistical reliability for all quit methods.
4. U.S. Preventive Service Task Force (USPSTF). January 2021. *Final Recommendation Statement: Tobacco Smoking Cessation in Adults, Including Pregnant Persons: Interventions*. Available at: <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/tobacco-use-in-adults-and-pregnant-women-counseling-and-interventions>.
5. CMCS Informational Bulletin. March 2024. Strategies to Improve Delivery of Tobacco Cessation Services. <https://www.medicaid.gov/federal-policy-guidance/downloads/cib03072024.pdf>.
6. Based on CMS Transformed Medicaid Statistical Information System (T-MSIS) Analytic Files (TAF) data. TAF contains demographic, enrollment, service utilization, and expenditure information for all Medicaid and CHIP beneficiaries, as submitted to T-MSIS by their respective state agencies. Analyses in this infographic are based on data from 49 states, DC, and Guam. Data from Puerto Rico, the U.S. Virgin Islands, and Massachusetts are excluded due to high concern data quality assessments in their 2023 inpatient and other services claims files. Data from states and territories with a high concern data quality assessment in only one of these two claims files are included in analyses but shown with a dotted overlay in the map. The Medicaid DQ Atlas has more information about state data quality and is available at: <https://www.medicaid.gov/dq-atlas/welcome>. The denominator for each state is the total number of beneficiaries who: (1) have eligibility information in TAF, (2) had full Medicaid or CHIP benefits as of their last enrollment, and (3) were age 18 or older as of January 1, 2023. The numerator for each state includes beneficiaries who are in the denominator and meet any of the following criteria: (1) at least one inpatient claim with a tobacco use disorder diagnosis code in the calendar year, OR (2) at least one pharmacy claim for varenicline in the calendar year, OR (3) at least two outpatient or long-term care claims with different dates of service with a tobacco use disorder diagnosis code in the calendar year. Note that while over-the-counter nicotine replacement therapy may be covered by Medicaid, states submitted very few claims to CMS for this type of therapy in 2023.

If you would like more information about the Medicaid and CHIP programs and their beneficiaries, please see the following additional resources:

- Other infographics in this series on tobacco and nicotine use and cessation activities:
 - The **Tobacco & Nicotine Use and Cessation Overview Infographic**, available at: <https://www.medicaid.gov/medicaid/benefits/downloads/2026-tobacco-overview-infographic.pdf>.
 - The **Adolescent Tobacco & Nicotine Use and Cessation Infographic**, available at: <https://www.medicaid.gov/medicaid/benefits/downloads/2026-adolescent-tobacco-infographic.pdf>.
 - The **Tobacco & Nicotine Use Among Pregnant Women and Adults with Behavioral Health Conditions**, available at: <https://www.medicaid.gov/medicaid/benefits/downloads/2026-select-populations-tobacco-infographic.pdf>.
- The **2026 Medicaid and CHIP Beneficiary Profile and Infographic** provide an overview of the characteristics, health status, access, utilization, expenditures, and experience of the beneficiaries served by Medicaid and CHIP. They are available at: <https://www.medicaid.gov/medicaid/quality-of-care/medicaid-chip-data-products>.
- CMS developed the interactive **Medicaid and CHIP Core Set Data Dashboard** to improve accessibility of data about the quality of care provided to Medicaid and CHIP beneficiaries. It is available at: <https://www.medicaid.gov/medicaid/quality-of-care/core-set-data-dashboard/welcome>.
- The **Improving Tobacco Cessation** section of the Medicaid.gov website provides information regarding CMS's quality improvement and technical assistance initiatives related to tobacco cessation: <https://www.medicaid.gov/medicaid/quality-of-care/quality-improvement-initiatives/tobacco-cessation>.
- A March 2024 **CMCS Informational Bulletin** highlights strategies that states have used to improve the delivery of tobacco cessation services to Medicaid and CHIP beneficiaries. It is available at: <https://www.medicaid.gov/federal-policy-guidance/downloads/cib03072024.pdf>.