

# Medicaid & CHIP Highlights: Tobacco & Nicotine Use Among Pregnant Women and Adults with Behavioral Health Conditions



## 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, highlighting two selected populations: pregnant women and adults with behavioral health conditions. Tobacco use during pregnancy is the leading preventable cause of miscarriage, stillbirth, and neonatal deaths, and also has health effects that extend into childhood.<sup>1</sup> Women who use tobacco should be supported with quitting as early as possible in pregnancy.<sup>2</sup> Tobacco use is disproportionately high among adult Medicaid and CHIP beneficiaries with behavioral health conditions.<sup>3</sup> Addressing this may require unique interventions that can reduce barriers particular to this population, along with implementation of established comprehensive tobacco prevention and control strategies.<sup>4</sup>

For the purpose of this infographic, the term “tobacco products” includes all the following: cigarettes, cigars, pipes, and smokeless tobacco. 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. Note that the use of other types of nicotine products, such as Zyn nicotine pouches, is not covered in this infographic, since these types of products are not included in the national surveys used for analysis.

## TOBACCO AND NICOTINE VAPING PRODUCT USE DURING PREGNANCY



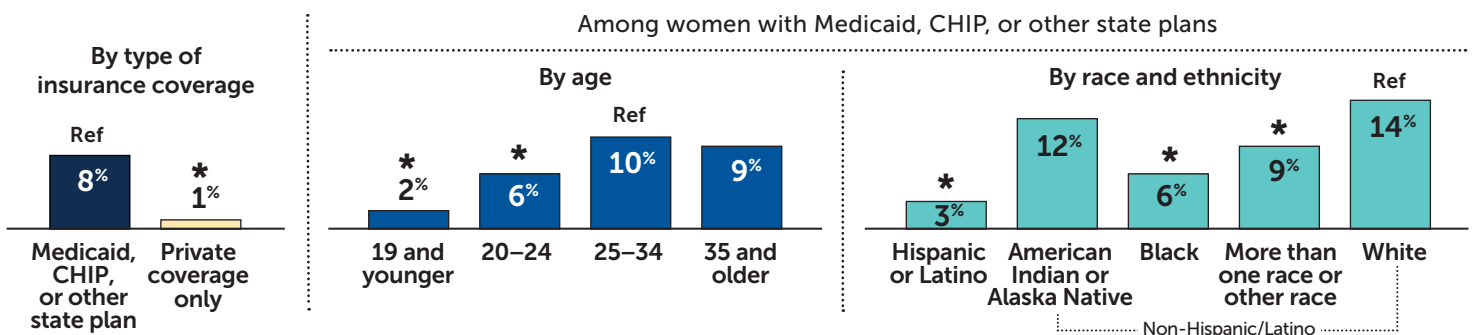
Smoking during pregnancy is associated with poor health outcomes for both mother and child, including a higher likelihood of preterm birth, lower birth weight, and delivery complications.<sup>5</sup> Nicotine vaping products are also not safe to use during pregnancy, since nicotine can damage the brain and lungs as the child develops.<sup>6</sup> State Medicaid programs are required to cover tobacco cessation counseling and pharmacotherapy with no cost-sharing during pregnancy.<sup>7</sup>



### Key Findings

- Women with Medicaid, CHIP, or other state-sponsored health plan coverage were significantly more likely than women with private coverage to report smoking cigarettes or e-cigarettes during the last three months of pregnancy.
- Among women with Medicaid, CHIP, or other state-sponsored health plan coverage, women ages 25 to 34 years were significantly more likely than younger women to report smoking cigarettes during the last three months of pregnancy. There was no significant difference in reported rates of smoking during the last three months of pregnancy between women ages 25 to 34 and women age 35 and older.

Percentage of Women with a Recent Live Birth in 29 States<sup>^</sup> Who Reported Smoking Cigarettes During the Last 3 Months of Pregnancy, 2022<sup>8</sup>

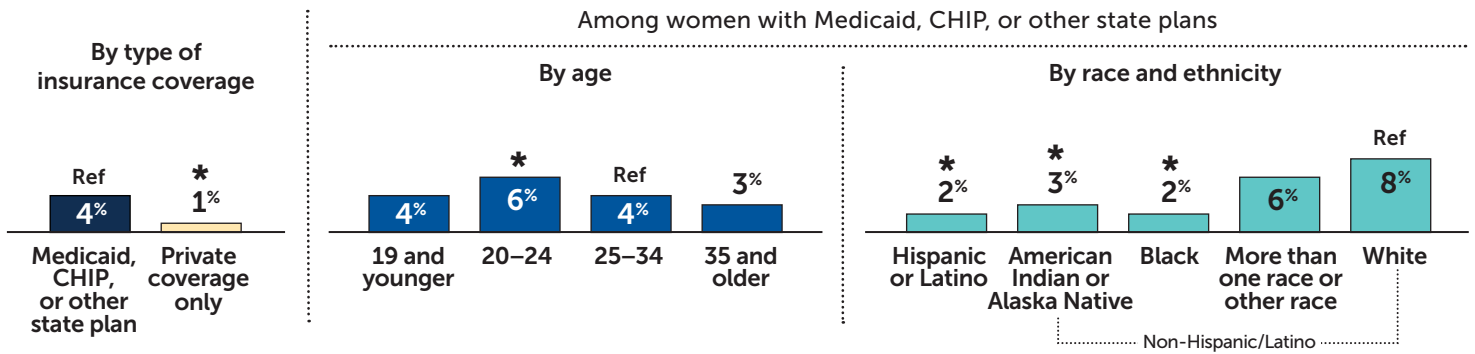


<sup>^</sup> Includes 26 states, DC, Puerto Rico, and the Northern Mariana Islands.

### 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 Women with a Recent Live Birth in 29 States<sup>^</sup> Who Reported Smoking E-Cigarettes During the Last 3 Months of Pregnancy, 2022<sup>8</sup>



<sup>^</sup> Includes 26 states, DC, Puerto Rico, and the Northern Mariana Islands.

In this section of the infographic, the term “adults” refers to individuals age 18 and older.



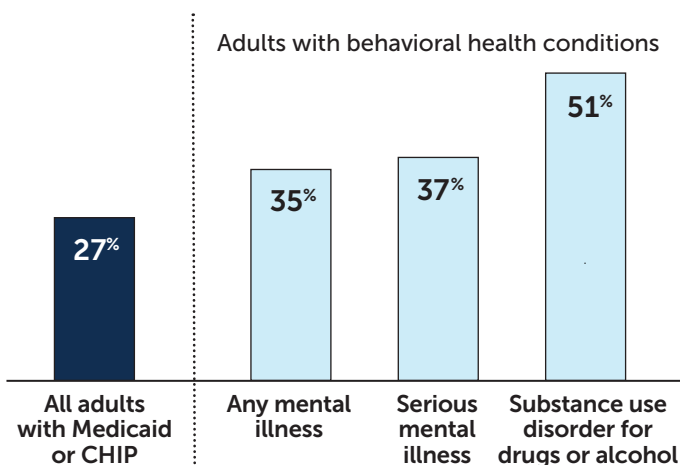
People with mental health conditions and substance use disorders are more likely to smoke than people without such conditions, and also tend to smoke more heavily. As the single largest source of funding for mental health and substance use treatment and services, Medicaid plays an important role in providing access to evidence-based, cost-effective tobacco cessation treatments for this population.<sup>7</sup>



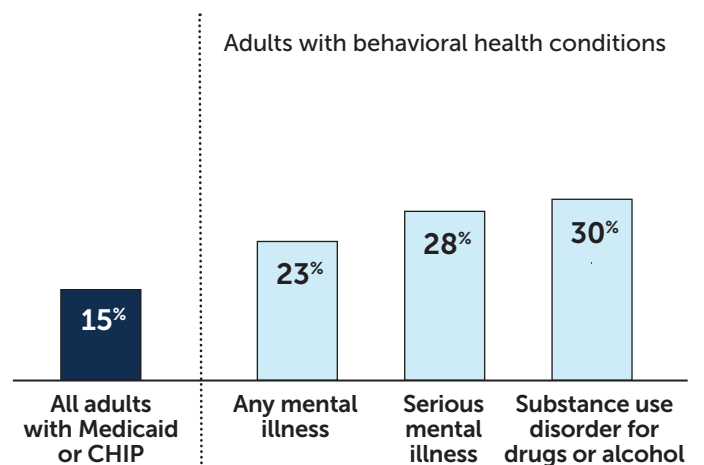
**Key Finding**

In 2024, adults with Medicaid or CHIP coverage and behavioral health conditions reported using tobacco or nicotine vaping products at higher rates than all adults with Medicaid or CHIP coverage.

#### Percentage of Adult Medicaid and CHIP Beneficiaries with a Behavioral Health Condition Who Reported Using Tobacco Products in the Past 30 Days, 2024<sup>3</sup>



#### Percentage of Adult Medicaid and CHIP Beneficiaries with a Behavioral Health Condition Who Reported Using Nicotine Vaping Products in the Past 30 Days, 2024<sup>3</sup>



1. Diamanti, A., Papadakis, S., Schoretsaniti, S., et al. 2019. Smoking Cessation in Pregnancy: An Update for Maternity Care Practitioners. *Tobacco Induced Diseases*, 17(August), 57. <https://doi.org/10.18332/tid/109906>.
2. American College of Obstetricians and Gynecologists (ACOG). May 2020. Tobacco and Nicotine Cessation During Pregnancy. Available at: <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2020/05/tobacco-and-nicotine-cessation-during-pregnancy>.
3. Based on Mathematica analysis of National Survey on Drug Use and Health (NSDUH), 2024 public use file. NSDUH is a nationally representative survey of the civilian noninstitutionalized population of the U.S. age 12 and older (50 states and DC). The imputation-revised Medicaid and CHIP variable used for analyses includes all individuals who reported coverage through Medicaid or CHIP at the time of the survey, either alone or in combination with other coverage. Results for individuals who reported some other type of coverage, or no health insurance coverage, at the time of the survey are not included in this infographic.  
  
Adults were categorized as having a behavioral health condition in the past year based on their answers to survey questions and criteria developed by the Substance Abuse and Mental Health Service Administration. The serious mental illness (SMI) and any mental illness measures are estimated based on a statistical model of a clinical diagnosis and responses to questions in the survey on distress, impairment, past year major depressive episode, past year suicidal thoughts, and age. SMI is defined as currently or at any time in the past year having had a diagnosable mental, behavioral, or emotional disorder (other than a developmental disorder or substance use disorder [SUD]) resulting in substantial impairment in carrying out major life activities. Any mental illness is defined as having had a diagnosable mental, behavioral, or emotional disorder (other than a developmental disorder or SUD) at any time in the past year, regardless of the level of impairment. The SUD measure is based on the criteria in the Diagnostic and Statistical Manual of Mental Disorders, 5th edition and includes disorders related to use of alcohol, marijuana, cocaine (including crack), heroin, hallucinogens, inhalants, methamphetamine, and any use of psychotherapeutic drugs, including prescription pain relievers, tranquilizers, stimulants, and sedatives.
4. Loretan, C. G., Wang, T. W., Watson, C. V., & Jamal, A. 2022. Disparities in Current Cigarette Smoking Among US Adults with Mental Health Conditions. *Preventing Chronic Disease*, 19, E87. <https://doi.org/10.5888/pcd19.220184>.
5. 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 (CDC), 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>.
6. CDC. May 2024. E-Cigarettes and Pregnancy. Available at: <https://www.cdc.gov/maternal-infant-health/pregnancy-substance-abuse/e-cigarettes.html>.
7. CMCS Informational Bulletin. March 2024. Strategies to Improve Delivery of Tobacco Cessation Services. Available at: <https://www.medicaid.gov/federal-policy-guidance/downloads/cib03072024.pdf>.
8. Based on Mathematica analysis of Pregnancy Risk Assessment Monitoring System (PRAMS), 2022 Automated Research File data. PRAMS is a joint surveillance project between state, territorial, or local health departments and the CDC. Survey respondents are women with a recent live birth, identified through birth certificate records. Data used for these analyses come from 26 states, DC, Puerto Rico, and the Northern Mariana Islands. Most data were from adults age 18 or older; about 1% of respondents in the analytic dataset (unweighted) were age 17 or younger. The Medicaid recode variable used for analyses includes individuals who reported Medicaid, CHIP, or other state-sponsored health plan coverage during pregnancy, either alone or in combination with another type of coverage. The private coverage only recode variable includes individuals who reported private coverage obtained through employment, the military, a parent, or a health insurance exchange during pregnancy. Results for individuals who reported some other type of coverage, or no health insurance coverage, during pregnancy are not presented since they do not meet criteria for statistical reliability. 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.  
  
Mathematica and CMS thank the PRAMS Working Group, which includes the PRAMS Team, Division of Reproductive Health, CDC and the following PRAMS sites for their role in conducting PRAMS surveillance and allowing the use of their data: Alabama, Arizona, Colorado, Delaware, District of Columbia, Hawaii, Kansas, Kentucky, Maine, Massachusetts, Michigan, Missouri, Montana, Nebraska, New Jersey, New Mexico, New York State, New York City, North Dakota, Northern Mariana Islands, Pennsylvania, Puerto Rico, Rhode Island, South Dakota, Utah, Vermont, Virginia, Washington, Wisconsin, Wyoming.

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 **Adult Tobacco & Nicotine Use and Cessation Infographic**, available at: <https://www.medicaid.gov/medicaid/benefits/downloads/2026-adult-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>.