PROJECT LEAD
Bobbye Gray, RN, BS, Tobacco Cessation Services Administrator, Tobacco Prevention and Cessation Program, Department for Public Health.

INITIATIVE GOAL
To increase financial sustainability for cessation services, including the quitline, through engaging public and private insurers to cost-share. The public-private partnership initiative supports the overall state goal to improve the health of its residents, therefore decreasing health care costs as well as increasing productivity to bring new business to the state.

INITIATIVE STATUS
Staff has established relationships with four health plans, the hospital association and other key stakeholders.

Kentucky received a grant last year to work with healthcare underwriters to encourage their employer groups to include a cessation benefit in their benefit package and to use the quitline for cessation counseling. Through this grant members of the Kentucky Association of Health Underwriters (KAHU) were provided an issue brief, toolkit, and a presentation on the benefits of cessation services at the KAHU’s annual state conference.

PUBLIC-PRIVATE PARTNERSHIPS
None at this time. However, a bill for smoke-free public places and places of employment was introduced this legislative session. The potential increase in call volume may be an excellent leverage point with which to engage private insurers.

PUBLIC-PUBLIC PARTNERSHIPS
State employees have access to nicotine-replacement therapy (NRT) and Chantix if enrolled in Cooper Clayton (a behavioral program) or quitline services, however the state employee benefit does not cover quitline costs.

BACKGROUND INFORMATION
Kentucky's tobacco prevalence: 24.8% or approximately 825,000 tobacco users.

Quitline service provider: National Jewish Health.

Quitline budget: $250,000 annually; no funding for promotion or outreach.

Population served: all residents.

Services provided: The Kentucky Quitline provides services seven days a week from 8 a.m. to 1:00 a.m. for a total of 119 hours per week. Callers 15 years of age and older receive five proactive behavioral coaching sessions. Pregnant participants receive up to eight sessions. Nicotine replacement therapy (NRT) was only provided to targeted high-risk populations with stimulus dollars that expired in February 2012. Kentucky will be adding an online cessation tool with National Jewish Health in the spring of 2012.

MAJOR PRIVATE INSURERS
Anthem Blue Cross/Blue Shield, Humana, Inc., United Healthcare and Bluegrass Family Health.

This project is made possible with funding from the Office on Smoking and Health, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services.
PUBLIC INSURERS
The Kentucky Medicaid benefit included all FDA-approved pharmacotherapy and physician counseling however, in November, 2011 Medicaid outsourced its services through four managed care organizations (MCOs). Efforts will be made to reach out to the MCOs to discuss the inclusion of cessation benefits, as tobacco program staff are unsure of what is currently being covered by the MCOs.

For additional information contact: Deb Osborne, Public-Private Partnership Manager, 800.398.5489 ext 705 or dosborne@naquitline.org
To access additional resources and tools, go to: http://www.naquitline.org/?page=PPP