MONDAY, AUGUST 17 | DAY 1

8 AM – 9:55 AM
REGISTRATION
Ravinia Ballroom Foyer
Registration opens at 8 a.m. Once that’s completed, please join us in the exhibit area for coffee and networking with exhibitors and colleagues!

10 AM – 11:20 AM
WELCOME TO NAQC CONFERENCE 2015!
Ravinia Ballroom
Linda Bailey, JD, MHS, President and CEO, NAQC

OPENING PLENARY
Redesigning QUITPLAN® Services: A Case Study from ClearWay Minnesota
Marietta Dreher, Director of Marketing and Communications, ClearWay Minnesota
Paula Keller, MPH, Director of Cessation Programs, ClearWay Minnesota
Barbara Schillo, PhD, Vice President, ClearWay Minnesota
Mary Kokstis, Vice President, Client Services, Alere Wellbeing, Inc.

This plenary will focus on why and how ClearWay Minnesota redesigned its cessation services, including the QUITPLAN Helpline, to engage more tobacco users in the quitting process. This innovative approach used research, expert input and insights from tobacco users to help define types of services, how to optimally use technology, reduce barriers, and better engage our target market. This case study will illustrate both the challenges faced by many quitlines and options for the field to consider for the future of cessation services. Presenters will describe:

- the rationale that led to the decision to make changes,
- the research process and key findings,
- the new suite of services,
- what it means for service providers to implement this type of approach to service delivery,
- evaluation results, and
- lessons learned.

10 minutes will be reserved for hearing questions and comments from attendees!

11:20 AM – 11:50 AM
BUZZ GROUPS
Ravinia Ballroom
Priorities for Refining and Redefining Quitlines
Each table of attendees will discuss their perspectives on 2-3 priorities for refining and redefining quitlines. Key points from table discussions will be collected and shared with all attendees.

NOON – 12:45 PM
LUNCHEON PLENARY
Ravinia Ballroom
Beyond the Telephone... Enhancing and Measuring Engagement in Technology-Based Services
Amanda L. Graham, PhD, Director, Research Development, The Schroeder Institute for Tobacco Research and Policy Studies, Legacy
Erik Augustson, PhD MPH, Program Director, National Cancer Institute

Enjoy lunch while learning about the latest innovations in the science and practice of technology-based services for cessation. Join national experts as they discuss the use and effectiveness of digital and social technologies to promote quitline services and sustained engagement among users.

1:00 PM – 2:30 PM
BREAKOUT SESSIONS (choose one of four concurrent sessions)
Salon E

Track 1: Opportunities for Ensuring Sustainability

Exploring the “Reasonable Alternative”: Lessons from a Quitline Employer Pilot (45 minutes)
Ryan C. Reikowsky, MA, MPH, Manager, Community Development Arizona Smokers’ Helpline

The Affordable Care Act (ACA) has expanded the coverage landscape for essential health benefits, including treatment for tobacco dependence. This creates opportunities for quitlines wishing to pursue cost-sharing options to ensure sustainability. ACA provisions allow employers to charge tobacco users a surcharge of up to 50% of their premium if they do not complete a “reasonable alternative” cessation program. In 2013, the Arizona Smokers’ Helpline initiated a pilot program with employers wishing to utilize quitline services to structure a “reasonable alternative”. This session will explore employee cessation outcomes, lessons learned, and future directions for quitlines considering pursuit of this opportunity.

Working with ACA Enrollment Counselors to Reach the Newly Insured (45 minutes)
Jennifer Singleterry, MA, Director, National Health Policy, American Lung Association

This session will explore how quitlines can leverage the organizations established by the Affordable Care Act to help people enroll in healthcare coverage to reach tobacco users who are newly insured. Enrollment assistors and counselors interact with many tobacco users at a crucial time: when they have new health insurance, are thinking about their health, and have potentially just been charged more in premiums because of their tobacco use. Participants will learn about a toolkit designed to help them coordinate with enrollment assistors to reach these “primed” tobacco users with cessation messages.

Salon F

Track 2: Adapting and Diversifying Quitline Practice to Increase Integration and Impact

Referral Methods and Success for PA Free Quitline Callers with Chronic Disease (45 minutes)
Livia Fortunato, MS, Project Manager, Public Health Management Corporation (PHMC)
Janene Brown, MPH, Research Assistant, PHMC
Jennifer Keith, MPH, CPH, Director of Evaluation and Operations, PHMC
Judy Ochs, Director, Pennsylvania Department of Health Division of Tobacco Prevention and Control
Susan McLain, MPH, Public Health Program Administrator, Pennsylvania Department of Health Division of Tobacco Prevention and Control

The Pennsylvania (PA) Department of Health provides telephone-based cessation counseling through the PA Free Quitline. Callers with chronic diseases (CDs like asthma, cancer, COPD, diabetes, heart disease, or high blood pressure), are significantly more likely (p<.001) to be fax or e-referred to Quitline services by a provider than those without CDs. At 3 and 6 months, quit rates for enrollees with CDs were significantly lower (p<0.05) than those without, even when controlling for NRT use and multiple counseling calls. Quitlines may consider providing specialized counseling/referral services for callers with CDs to address their unique barriers to quitting tobacco.

Quitline Adaptations to Serve an Integrated Cessation Solution (45 minutes)
John Atkinson, MSW, BA, Oni, Director, Cancer Prevention and Tobacco Control, Canadian Cancer Society (CCS)
Gail Luciano, MEd, BSc, Manager, Smoking Cessation, Smokers’ Helpline, CCS

There are great cessation programs in the Champlain region of Ontario, but only 5% of smokers were taking advantage of them. Service providers partnered together to do extensive market research and to develop a unified, evidence-based system and related brand and marketing campaign to increase access, reach, quality and client satisfaction. Ontario’s provincial quitline is the hub of the solution, booking clients directly into local services and securely transferring client assessment information to providers. Learn about the creation of an integrated regional approach to increase the number of individuals who make a quit attempt using evidence-based cessation services.

Track 3: Innovative Strategies & Solutions to Increase Access, Utilization, Reach and Effectiveness

Innovative Strategies to Refer Disparate Populations to the Quitline (45 minutes)
Ann Marie Newman, BA, Senior Project Coordinator, Tobacco Research and Evaluation Team, University of Texas at Austin (UT)
Shelley Karn, EdD, Program Director, Tobacco Research and Evaluation Team, UT
Trina Robertson, MA, Senior Project Coordinator, Tobacco Research and Evaluation Team, UT
Lou Ann Grossberg, MS, Senior Project Coordinator, Tobacco Research and Evaluation Team, UT
Barry Sharp, MSHP, MACM, MCHES, Manager, Tobacco Prevention and Control Branch, Health Promotion and
The UT Tobacco Research & Evaluation Team has developed a Quitline referral app for use with an Android or iPhone device in any community needing a simple referral option. In addition, work has begun specifically with community health workers/promotores (hereinafter referred to as promotores) to continue the expansion of the Texas Quitline App. The promotores are a valuable part of the healthcare team in areas where they are affiliated to healthcare organizations, the Texas Department of States Health Services, colleges or universities.

Reaching New York State Tobacco Users through Opt-to-Quit™ (45 minutes)
Patricia A. Bax, RN, MS, Marketing and Outreach Coordinator Department of Health Behavior Roswell Park Cancer Institute

The Provider Referral Program, Opt-to-Quit™ was developed by Roswell Park Cancer Institute (RPCI) in Buffalo, New York for the New York State Smokers’ Quitline (NYSSQL). It is a policy-driven, system-wide solution to reach tobacco users who otherwise might not have access to cessation services. Through Opt-to-Quit™, the facility or program establishes a patient opt-out policy which triggers the referral process and links tobacco using patients to the evidence-based services of the NYSSQL. RPCI is successfully implementing the Opt-to-Quit™ Program across New York State healthcare facilities, including two units of Stony Brook Children’s Hospital in Long Island, New York.

Measuring Quit Rates in a Rapidly Changing Landscape: Sneak Peek of the Updated NAQC Issue Paper (45 minutes)
Anne Betzner, PhD, Vice President, Professional Data Analysts, Inc. (PDA)
Julie Rainey, Vice President, PDA
Becky Lien, MPH, Senior Analyst, PDA

A 2015 Update to the 2009 NAQC Issue Paper Measuring Quit Rates was just released - come get a sneak peak! This session will highlight key changes in the recommended NAQC standard quit rate, based on the changing landscape of tobacco control in the U.S. and Canada. Key issues discussed include how to treat participants from web-based and other non-telephone cessation technologies, the recommended response rate, and options for how to gather high quality quit rate data on a limited budget. E-cigarette use will also be covered. After each new recommendation, participants will be invited to ask questions and discuss.

Proven Strategies for Higher Survey Response and Better Data Quality (45 minutes)
Becky Lien, MPH, Senior Analyst, Professional Data Analysts, Inc. (PDA)
Julie Rainey, Vice President, PDA
Anne Betzner, PhD, Vice President, PDA
Harlan Luxenberg, MA, President, PDA

Frustrated by low response rates in your outcome studies but not sure how to make improvements? Worried it will cost too much? Evaluators will share their lessons learned for achieving response rates over 50% in quitline outcome studies. Presenters will discuss key strategies to help you improve your outcome data. Whether you conduct your own follow-up studies or you outsource to a vendor, this presentation will help you identify easy but important areas for improvement that are sure to increase your response rates. You’ll also learn which strategies add little or no cost to your evaluation.

Retail Pharmacies: A New Health Partner in Cessation Treatment and Referral to Quitlines (60 minutes)
Catherine Saucedo, BA, Deputy Director, Smoking Cessation Leadership Center University of California, San Francisco
Jeffrey Garbe, RPh, Director, Corporate Social Responsibility and Philanthropy CVS Health
Parisa Vatanka, PharmD, Pharmacy Strategic Alliances Manager, Safeway, Inc.(invited)

For the past decade, the Smoking Cessation Leadership Center worked to engage health professionals in cessation treatment and refer smokers to quitlines. Learn about the diversity of health professionals who provide cessation treatment and can partner with quitlines. Recently, CVS and Safeway launched innovative multi-state cessation
programs through their retail pharmacies that provide treatment and refer smokers to quitlines. Case studies will be presented that describe these programs, partnership efforts with state quitlines, and lessons learned. Participants will develop strategies to enhance such programs and engage other health professionals in cessation treatment and referral.

**Track 2: Adapting and Diversifying Quitline Practice to Increase Integration and Impact**

*Teaching, Engagement and Systems Change with Prenatal Providers (60 minutes)*

*Jan Schnellman, MEd, Director; Research, Evaluation and Training Alere Wellbeing, Inc.*

*Kara Kikuchi, ND, Manager, Training and Outreach Programs, Alere Wellbeing, Inc.*

*Katy L. Wynne, EdD, MSW, Cessation Program Coordinator/Quitline Manager, South Carolina Department of Health and Environmental Control*

This session will report on the best practices used by the South Carolina Tobacco Quitline to further reduce the rate of infant mortality and improve birth outcomes in South Carolina through provider engagement and training in systems change. The presentation will provide an overview of best practice, benefits of tobacco cessation health systems change, and the SC Quitline Prenatal Training and Engagement Program to include services, project milestones, and how providers participate.

**Track 3: Innovative Strategies & Solutions to Increase Access, Utilization, Reach and Effectiveness**

*Using Apps to Help Smokers Quit: Some Research, Data, and Real-world Applications (60 minutes)*

*Jo Masterson, RN, MBA, COO & Co-Founder 2Morrow, Inc*

*Joella Pyatt, RDH, BS, Tobacco Cessation Coordinator, Washington State Department of Health*

Smartphones are changing the way people access information. Every month, over 1M apps are downloaded by people trying to quit smoking, however until recently there had been little data on efficacy. In this session, results from the first randomized control trial of a smartphone app for helping smokers quit will be presented by Jo Masterson. Real-world data, potential and pitfalls, lessons learned and things to know before launching a mobile solution will be discussed. Lastly, Joella Pyatt will talk about their experience with launching the SmartQuit app to smokers in Washington.

**Track 4: Building Better Practice Through Research, Evaluation and Assessment**

*Six-State Quitline Outcomes for Smokers with Behavioral Health Conditions and Limitations (60 minutes)*

*Amy V. Lukowski, PsyD, Clinical Director, Health Initiatives Programs Licensed Psychologist National Jewish Health*

*Chad D. Morris, PhD, Associate Professor and Director, Behavioral Health & Wellness Program University of Colorado*

National Jewish Health launched a year-long survey based on recommendations by the NAQC’s Behavioral Health Advisory Forum’s Background Report (2010). Data from 4,960 completed follow-up interviews were used to examine quit rates. Among callers with behavioral health issues, those who reported a belief that these issues may interfere with their ability to quit using tobacco were significantly less likely to report no tobacco use in the past 30 days than callers who did not believe that their behavioral health issues could interfere. This real-world sample and outcomes have important implications for further investigation and possible modification of treatment.

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4:15 PM – 5:15 PM

**AFTERNOON PLENARY**

*Ravinia Ballroom*

ENDS: Considering the Quitline Caller’s Perspective

*Linda Bailey, JD, MHS (moderator), President and CEO, NAQC*

*Brian King, PhD, MPH (panelist), Deputy Director for Research Translation, Office on Smoking and Health, Centers for Disease Control and Prevention*

*Laurie Krupski, PhD (panelist), Clinical Manager, Roswell Park Cessation Services*

*Ken Wassum (panelist), Director of Clinical and Quality Support, Alere Health, Inc.*

*Michael Fiore, MD, MPH, MBA (reactant), Professor of Medicine and Director, Center for Tobacco Research and Intervention (UW-CTRI) at the UW School of Medicine and Public Health*

In December 2014, NAQC published a report on the science and quitline practices related to Electronic Nicotine Delivery Systems (ENDS). Join us for a discussion with national experts on ENDS and cessation treatment that will take us beyond the findings of the 2014 report to explore:

- What we know about quitline callers who are interested in or using ENDS;
- What type of information can be shared with callers about potential harms and benefits of ENDS;
- What type of treatment protocols are currently in use for callers who use ENDS; and
- What outcomes are being reported among these callers.

5:15 PM – 6:30 PM  
**RECEPTION**  
*Ravinia Ballroom Foyer*  
Join your colleagues to network and celebrate! This year, NAQC will acknowledge excellence in service for a group of members who have contributed in special ways to advancing quitlines!

6:30 PM  
Dinner on your own!

**TUESDAY, AUGUST 18 | DAY 2**

8:30 AM – 9:35 AM  
**MORNING PLENARY**  
*Ravinia Ballroom*  
Registration opens at 8 a.m. Once that’s completed, please join us in the exhibit area for coffee and networking with exhibitors and colleagues!

**Integrating Quitlines into Healthcare: Progress with eReferral and Provider Engagement in Cessation**  
Rob Adsit, MEd (moderator), Director of Education and Outreach Programs, University of Wisconsin Center for Tobacco Research and Intervention  
Chris Anderson, BA (panelist), Project Director, California Smokers’ Helpline, Moores Cancer Center, University of California San Diego  
Shelley Karn, EdD (panelist), Program Director, Tobacco Research and Evaluation Team, Department of Kinesiology and Health Education, the University of Texas at Austin  
Hillary Tindle, MD, MPH (panelist), Associate Professor of Medicine, Founding Director of ViTAL, the Vanderbilt Center for Tobacco, Addiction and Lifestyle, Vanderbilt University  
Robin Daigh, MBA (presenter), President of Health Initiatives, National Jewish Health

During this plenary, the moderator will provide an overview of recent health care reform initiatives, with a focus on the impact of these initiatives on payment reform for the health care sector and how this translates into eReferral opportunities for quitlines. A panel will share their experiences in building eReferral systems between quitlines and health care institutions. The lead author of NAQC’s technical guide on eReferral will share highlights from the soon-to-be-published technical guide, emphasizing how the guide builds on lessons learned over the past three years and offers a straightforward and standard approach to building eReferral capacity between quitlines and health care organizations.

9:35 AM – 9:55 AM  
**BUZZ GROUPS**  
*Ravinia Ballroom*  
Challenges and Resources for eReferral  
Following the eReferral plenary presentation, attendees will work in small groups to identify: 1) the top three challenges quitlines face in building an eReferral capacity with health care providers; and 2) ways NAQC can best support eReferral activities. The results from all tables will be shared with attendees.

10:00 AM – 10:15 AM  
**BREAK**  
*Ravinia Ballroom Foyer*  
Please join us in the exhibit area for coffee, snacks and networking with exhibitors and colleagues!

10:20 PM – 11:50 PM  
**BREAKOUT SESSIONS (choose one of four concurrent sessions)**

**Track 1: Opportunities for Ensuring Sustainability**

**Salon E**  
**Making the Case for Quitlines (45 minutes)**  
Maria Rudie, (moderator), Research Manager, NAQC  
Lori Younker, Director of Programs & Events, American Lung Association Lung HelpLine/Tobacco Cessation Quitline, Illinois Tobacco Quitline  
Sheila Garrett, Cessation Section Chief, Arkansas Tobacco Prevention & Cessation Program  
Judy Ochs, Director, Division of Tobacco Prevention & Control, Pennsylvania Department of Health  
Mary Kokstis, Vice President Client Services, Alere Wellbeing, Inc.  
Cindy Haugland, Business Development Manager, National Jewish Health

Between 2007-2013, the total state quitline funding has increased from $70,655,585 to $125,468,946 and the average number of direct calls has increased from 65,000 to over 132,000. Quitlines are providing evidence-based cessation...
services to nearly 450,000 tobacco users annually and overall have achieved a quit rate of 31.6%. Despite these successes, quitlines are increasingly forced to “make the case” for continued funding. With the implementation of the Affordable Care Act, more questions have been raised by decision-makers about the need to continue funding quitlines. Come learn from states and service providers who have had to “make the case” for continued quitline funding and share your experiences!

Partnering to Advance Quitline Sustainability and Cessation Coverage: Four State’s Experiences (45 minutes, followed by lunch & learn discussion table)

**Bobbye Gray, RN, BS**, Tobacco Cessation Administrator, Tobacco Prevention and Cessation Program, Kentucky Department for Public Health

**Anna Landau, MPH**, Director of Tobacco Cessation Programs, Tobacco Cessation and Prevention Program, Massachusetts Department of Public Health

**Joyce L. Swetlick, MPH**, Director of Tobacco Cessation, Tobacco Prevention & Control Branch-Division of Public Health, N.C. Department of Health and Human Resources

**Joella Pyatt, RDH, BS**, Cessation Services Consultant, Community Based Prevention Office of Healthy Communities, Division of Prevention & Community Health, Washington State Department of Health

Engaging health insurers to provide tobacco cessation coverage can be a complex and time consuming process. Insurers often don’t understand what constitutes evidence-base coverage or that the Affordable Care Act (ACA) requires them to provide comprehensive coverage. Most often they are unaware of how quitlines can help them cost-effectively meet the ACA requirement. The NAQC Public-Private Partnership (PPP) Initiative has assisted over a dozen states during the past three years to advance cessation coverage among insurers. This presentation, featuring four PPP states, will highlight each state’s unique story of how they engaged insurers to increase cessation coverage and/or cover quitline costs for their members. The discussion on this topic will continue over lunch!

**Track 2: Adapting and Diversifying Quitline Practice to Increase Integration and Impact**

**California: Improved Reach, Retention, and Outcomes for Medicaid Members (45 minutes)**

**Chris M. Anderson**, Project Director, California Smokers Helpline (CSH)

**Carrie Kirby, MS**, Staff Research Associate, MIQS Project Manager, CSH

**Shu-Hong Zhu, PhD**, Professor of Family Medicine and Public Health, Principal Investigator, CSH

This session will share exciting findings from the Medi-Cal Incentives to Quit Smoking project. First we will show that the rate of smoking among Medicaid members is high and fairly stable. Encouragingly, however, Medicaid members are active participants in the California quitline, especially following the introduction of incentives including free nicotine patches and small gift cards. We will share results of a large randomized controlled trial demonstrating that these modest incentives improve retention and participation, leading to better long-term quitting outcomes. We will also describe how these incentives dramatically increased the cost effectiveness of direct-to-consumer promotion, improving the quitline’s reach.

Tobacco Treatment for Medicaid Members: Survey Results and Successful Partnerships (45 minutes, followed by lunch & learn discussion table)

**Emma Goforth, MPH (moderator)**, Manager of Programs, NAQC

**Julie Hare**, Director, Public Information Unit, Tobacco Prevention & Control Branch, Alabama Department of Public Health

**Eoana Sturges, MPH**, Tobacco Program Manager, Vermont Department of Health

In Spring 2015, NAQC conducted a survey to gather information on how state quitlines are currently working with state Medicaid programs to provide tobacco treatment services for Medicaid members and how they are seeking funding, reimbursement or cost-sharing agreements for those services. This session will provide a “first look” at the survey results and will feature an opportunity to hear from several states on strategies for successfully working with Medicaid agencies on tobacco treatment coverage and payment for quitline services. After this session, join us for a lunch & learn discussion with peers and to “hack” common issues that states experience when partnering with Medicaid.

**Track 3: Innovative Strategies & Solutions to Increase Access, Utilization, Reach and Effectiveness**

**An Update on Lung Cancer Screening Policy and the Role of Quitlines (45 minutes)**

**Robert J. Volk, PhD**, Professor, University of Texas MD Anderson Cancer Center
Recent research shows that screening high-risk smokers for lung cancer with low-dose computed tomography reduces lung cancer deaths by about 20%. Yet, there are trade-offs between harms and benefits that smokers must consider in making a decision to be screened. More importantly, lung cancer screening is not an alternative to quitting smoking. The purpose of this session is to describe policy changes regarding lung cancer screening, and the implications of these changes for quitlines.

**Approaches for Engaging Behavioral Health Populations: Strategies and Successes (45 minutes)**

**Sana Hashim, MPH, CPH, CHES, Project Coordinator, Maryland Tobacco Quitline, Maryland Department of Health and Mental Hygiene**

Maryland has successfully implemented a variety of strategies to engage both residents with behavioral health issues as well as behavioral health providers around smoking cessation and Quitline awareness and referral. These strategies range from printed materials, to mass media, to toolkits, and trainings. This session will equip audience members with actionable tools that they can take home to implement in their own states and communities.

**Track 4: Building Better Practice Through Research, Evaluation and Assessment**

**Feasibility of Delivering Varenicline through a Telephone Quitline to Promote Smoking Cessation (45 minutes)**

**Susan Pike, Operations Manager, Roswell Park Cessation Services**

**Laurie Krupski, PhD, Clinical Manager, Roswell Park Cessation Services**

Varenicline may show superior quit rates to the nicotine replacement therapy (NRT) that is currently distributed through the quitline, but has not been routinely delivered by or evaluated in the context of quitlines. Learn the outcomes of a study that sought 1) to assess the feasibility of distributing varenicline through the NY State Smokers’ Quitline (NYSSQL); and 2) to compare cessation rates between those receiving mail-delivered varenicline compared to standard mail-delivered NRT. Understand valuable lessons learned about the process that can help to better engage participants.

**From “Like” to Quit: How Oklahoma Engaged Fans Online and Turned Them into Quitters (45 minutes)**

**Sjonna Paulson, APR, Health Communications Director, Oklahoma Tobacco Settlement Endowment Trust**

**Greta Anglin, Group Account Director, VI Marketing and Branding**

**Casey Cornett, Social Media Director, VI Marketing and Branding**

Come learn about the statewide social media campaign that promotes the Oklahoma Tobacco Helpline. Presenters will discuss different media tactics for reaching different audiences and how they have learned to increase call volume through our research and execution.

**LUNCH**

**Ravinia Ballroom, Foyer and Select Breakout Session Rooms**

Grab a boxed lunch and spend an hour with colleagues exploring hosted exhibits or sharing ideas at semi-facilitated lunch & learn discussion tables on critical topics of interest!

A final list of exhibitors and discussion table topics will be provided at conference registration! Here are some of the lunch & learn discussion table topics….

**eReferral topics:**

- 101 on the New Technical Guide on eReferral
- HL7 – The History, the Basics and What it Means for eReferral
- Incorporating eReferrals into the Work Flow of Clinic Systems
- The Value of Training and Systems Change for Effective eReferral

**Partnership efforts:**

- Partnering to Advance Quitline Sustainability and Cessation Coverage
- Using Quitline Partnerships to Improve Patient Access to Tobacco Cessation Treatments
- Improving Quitline Outcomes by Building Trust

**Opportunities to collaborate in national initiatives:**

- HUD’s Smoke-free Housing Initiative!
- Lung Cancer Screening Policy
**Track 1: Opportunities for Ensuring Sustainability**

**A Hospital Bi-directional eReferral Pilot Process: Process and Patient Outcomes (45 minutes)**

*Anna Schulze, MSW, Project Coordinator, Tobacco Treatment Service Organization: UPMC*
*Kristi Powers, MHA, Project Manager, UPMC Information Services Division*
*Marty Maness, PMP, MBA, Systems Engineering Manager, National Jewish Health*
*Judy Ochs, Director, Division of Tobacco Prevention and Control, Pennsylvania Department of Health*

Session will provide a review of how UPMC, National Jewish Health, and the Pennsylvania Department of Health collaborated to establish a bi-directional electronic referral (eReferral) process, built on Meaningful use standards, to the PA Free Quitline at UPMC’s flagship Presbyterian University Hospital. A description of the information technology infrastructure, staff support, and quitline services necessary to complete the eReferral will be provided as well as a review and discussion of initial process and patient outcomes. Presenters will share the prospective of the hospital (UPMC) and quitline provider (National Jewish Health).

**Integrating Quitline eReferrals into Existing Electronic Health Records: OK Hospitals’ Experience and Challenges (45 minutes)**

*Joy L Leuthard, MS, LSWA, Manager, Health Improvement Initiatives Oklahoma Hospital Association*
*Eric Finley, MPH, Tobacco Cessation Systems Coordinator Hospitals Helping Patients Quit Oklahoma Hospital Association*

Quitline eReferral as part of evidence-based tobacco treatment within Electronic Health Records (EHRs) is essential for effectively treating patients. Increasing numbers of health systems are adopting EHRs to meet various requirements and streamline treatment. Tobacco treatment must be a part of EHRs for consistent and sustainable care leading to reducing tobacco related morbidity and mortality. Presenters will demonstrate how the Oklahoma Hospital Association and partner hospitals have implemented eReferrals in two different inpatient/outpatient settings: 1) a Native American tribal health system; and 2) a large statewide multi-hospital and clinic system. Presenters will share processes, experiences and challenges in both of these settings.

**Track 2: Adapting and Diversifying Quitline Practice to Increase Integration and Impact**

**Is There a Synergy that Curves Tobacco Use in the Behavioral Health Population? (45 minutes)**

*Yvon Filis-Aime, FMG, MBA/HAS, Behavioral Health and Wellness Program Manager, ODMHSAS*
*David Heath Holt, MHR, Senior Behavioral Health & Wellness Coordinator, ODMHSAS*

Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) expanded its Cessation Systems Initiative into a Behavioral Health and Wellness Systems Initiative to strengthen tobacco cessation efforts while adding components directed at physical activity and nutrition for a single, comprehensive effort toward improving the health of Oklahomans recovering from mental illness and/or addiction. Join us to learn more about this exciting project!

**Developing Evidence-based Tailored Cessation Services for Smokers with Mental Health Conditions (45 minutes)**

*Uma S. Nair, PhD, Assistant Professor, University of Arizona/Arizona Smokers' Helpline*
*Cynthia Thomson, PhD, RD, Professor, University of Arizona Director, Arizona Smokers' Helpline*

Extant evidence exists on high rates of comorbidity among smokers and challenges to tobacco use behavior change, especially among individuals with mental health conditions. The future of quitlines will require improvements in tailored cessation services for this high-risk group. The session first will: 1) present findings on associations between co-morbid conditions and tobacco use outcomes among individuals who were enrolled in the Arizona Smokers helpline (ASHLine); and then 2) describe the development and implementation of trainings and protocols for providers and coaches to maximize smoking behavior change among the mental health population.

**Track 3: Innovative Strategies & Solutions to Increase Access, Utilization, Reach and Effectiveness**

**Construction of Smoking Cessation Interventions for Trade Workers (45 minutes)**

*John Atkinson, MSW, BA, Oni, Director, Cancer Prevention and Tobacco Control, Canadian Cancer Society (CCS)*
Heidi McKean, RN, BSN, Public Health Nurse, Ottawa Public Health/ Sante publique Ottawa

Ottawa Public Health (OPH) is working with construction/trade workers and community smoking cessation service providers to support workers on construction sites to become or remain smoke-free. This presentation will describe how OPH works with construction companies to design, implement and evaluate a tailored smoking cessation program for Construction Trade workers. The presenters will articulate the importance of the partnership with the Smokers’ Helpline, relationship building, effective interventions utilized with the workers at the worksite and apprentices and lessons learned. Participants will receive useful promotional tools, motivational strategies to apply to local settings to expand existing smoking cessation efforts.

Louisiana African American Male Cessation Initiative (45 minutes)
Alex Hurst, MHA, Tobacco Free Living (TFL) Cessation Manager, Louisiana Public Health Institute (LPHI)
Tonia Moore, SMHCM, Associate Director, TFL, LPHI
Linda E. Brown, Director, Community of Color Network
Earl Benjamin, MHA, Disparities Population Lead, LPHI
Snigdha Mukherjee, PhD, Associate Director, Division of Evaluation and Research, LPHI
Dodie L. Arnold, PhD, MSPH, Evaluation Manager, LPHI

African American adults have one of the highest smoking rates and one of the lowest quit rates in the US, with disproportionately high rates of morbidity and mortality from tobacco-caused disease. While African American smokers are also likely to make serious quit attempts, they tend to prefer to quit cold turkey or on their own, without the benefit of evidence-based treatments that could potentially increase their quit rates. African American smokers tend to underutilize these evidence-based quitlines. This study describes characteristics of African-American male callers to the Louisiana Quitline and the intervention to promote awareness of the cessation related disparity.

Track 4: Building Better Practice Through Research, Evaluation and Assessment

ENDS Users Who Call Quitlines: Surveillance Data and Research Findings (45 minutes)
Katrina Vickerman, PhD, Research Scientist, Alere Wellbeing, Inc.
Laura Beebe, PhD, Professor, Department of Biostatistics and Epidemiology, University of Oklahoma Health Science Center
Gillian Schauer, MPH, Public Health Advisor, Carter Consulting, Inc
Brian King, PhD, MPH, Deputy Director for Research Translation, Office on Smoking and Health, Centers for Disease Control and Prevention
Brooke Magnusson, MA, Associate Director, Research Operations, Alere Wellbeing, Inc.

This session will present data from four research projects on: (1) Electronic Nicotine Delivery System (ENDS) use and reasons for use among quitline callers; (2 and 3) program engagement and outcome evaluation data for ENDS users in two quitline samples; and (4) qualitative interview findings regarding experiences and beliefs about ENDS products, in relation to nicotine replacement therapy and tobacco use. We will summarize what is known about ENDS use among quitline callers, how this may impact quitline treatment, and potential future directions for public health research and practice.

MDS Questions on Electronic Nicotine Delivery Systems – ENDS (45 minutes)
Maria Rudie, MPH, Research Manager, NAQC
Amy V. Lukowski, Psy.D., Clinical Director, Health Initiatives Programs, National Jewish Health
Jenny Kerklivet, MA, Research Associate II, College of Nursing, South Dakota State University
Katrina Vickerman, PhD, Research Scientist, Alere Wellbeing, Inc.

The November 2014 NAQC publication “Cessation Treatment and E-Cigarettes” recommended development of standard intake and follow-up questions on ENDS for the Minimal Data Set (MDS). To meet that need, NAQC created an MDS ENDS workgroup with 9 NAQC members who represent quitline funders, service providers and tobacco cessation researchers. During this panel presentation, attendees will hear from MDS ENDS workgroup members on the workgroup’s recommendations. Join us to hear the recommendations and share your comments!

3:00 PM – 4:00 PM

Closing Plenary
Ravinia Ballroom
Creating a Vision for the Future of Quitlines
NAQC Board of Directors and CEO

The Board of Directors and CEO will engage attendees in a dialogue to create a future vision for quitlines. How does your vision today compare to NAQC’s 2014 report on the future of quitlines? Share your ideas and hear the Board and CEO’s perspectives on the quitlines of 2020. Please consider:
- What quitline services will be offered in the future?
How will technology be used to reach tobacco users and deliver services?
How will quitlines be financed? Who will pay for quitline services?
What important roles will be played by the state/provincial governments? Federal governments? The healthcare sector? Private entities? How will these activities be coordinated?
How will quitlines and cessation services be promoted?
How will we reach more tobacco users? Underserved populations? Populations using new products?
How will we improve our outcomes?
Highlights from this session will be shared with attendees and all NAQC members after the conference!

Thanks to our sponsors and supporters for making NAQC Conference 2015 possible!