Where do Quitlines go from Here? Developing a Roadmap for the Next 20 Years

The National Landscape and Quitlines

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Two Year Disclosure Statement

Nothing to report.
The National Landscape and Quitlines

- Setting the stage
- Federal Initiatives – The Medicaid opportunity
- Federal Initiatives – Health Care Reform
- Private Initiatives - The New Joint Commission Measures
- The Endgame – Eliminating Tobacco Use and the Role of Quitlines
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The Medicaid Opportunity

• Medicaid members smoke at dramatically higher rates
• Medicaid members seek out quitline services
• CMS is committed to making the Administrative Match work
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The Affordable Care Act & Quitlines (Effective 2014)

I. Insurance Reforms and Expansion of Coverage

• All preventive services that received an “A” or “B” from the USPSTF – including Tobacco Cessation – are covered

• Essential Health Benefits requirement: all qualified health plans must include tobacco cessation treatment

• Coverage for Tobacco Cessation Treatments for pregnant Medicaid enrollees
II. Expansion of Federal Public Health Efforts

• Prevention Health Fund
  ▪ $2 billion/year beginning in 2015 (less in prior years) to fund prevention, wellness, and public health initiatives including tobacco cessation and control

• Expand community health centers and the National Health Service Corps Fund
  ▪ $11 billion over 5 years
The Affordable Care Act & Quitlines (Effective 2014)

III. Pilot and Demonstration Programs

• Incentive grants program through CMS
  ▪ 10 States funded
  ▪ Many with cessation
  ▪ $100 million total over 5 years

• Community Transformation Grants

• Many others
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The Joint Commission and Hospitalized Smokers: A New Performance Measure-Set for Tobacco Cessation

The Role of Quitting
Performance Set Measures
(October 2010)

• Performance Measure 1: Tobacco Use Screening
• Performance Measure 2: Tobacco Use Treatment, and Counseling & Medication during Hospitalization
• Performance Measure 3: Tobacco Use Treatment Management at Discharge
• Performance Measure 4: One Month Follow-Up Assessing Treatment Use and Cessation
The Joint Commission’s New Tobacco-Cessation Measures — Will Hospitals Do the Right Thing?

Michael C. Fiore, M.D., M.P.H., M.B.A., Eric Goplerud, Ph.D., and Steven A. Schroeder, M.D.
Performance Measures
1. On Admission
   Document tobacco-use status of all patients

Hospital Flowchart
Ask all patients if they used tobacco in the 30 days prior to hospitalization and document response in the medical record ("record")

Assess tobacco user’s willingness to attempt to quit during the hospitalization or interest in medications to relieve symptoms of withdrawal

Interested in quitting

Interested in relieving withdrawal symptoms only

Not interested in quitting or in relieving withdrawal symptoms

2. During Hospital Stay
   Deliver evidence-based cessation counseling and medication
   
   Assist by providing practical counseling and medication
   Document in record
   Optional: provide information on quit line

   Assist by providing medication
   Document in record
   Optional: provide information on quit line

3. At Discharge
   Arrange for evidence-based counseling and prescribe medication for period after discharge
   
   Arrange by referring patient for follow-up counseling (via quit line, fax, or electronic means) and by providing prescription for medication
   Document in record

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   Document in record
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4. After Discharge
   Check tobacco-use status after discharge
   
   Follow up by contacting patient about 30 days after discharge or use quit-line record to determine tobacco-use status
   Document in record

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   Document in record

The New Joint Commission Tobacco Cessation Performance Measure-Set.
After a patient’s tobacco use and level of interest in quitting have been determined at admission, specific approaches are recommended for the hospital stay, at discharge, and on follow-up (as derived from the 2008 Public Health Service Guideline). Counseling about evidence-based tobacco-cessation measures and prescribing of appropriate medication can take place as long as there are no contraindications and the patient does not refuse such treatment. Quit line (1-800-QUIT NOW) is an evidence-based telephone service that offers tobacco-cessation counseling and is available in all 50 states.
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2. During Hospital Stay
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- **Interested in quitting**: Assist by providing practical counseling and medication. Document in record. Optional: provide information on quit line.
- **Interested in relieving withdrawal symptoms only**: Assist by providing medication. Document in record. Optional: provide information on quit line.
- **Not interested in quitting or in relieving withdrawal symptoms**: Document in record. Optional: provide information on quit line.
Performance Measures

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Smoking Prevalence Among Adults 18 and Older, United States, 1965-2010

Source: NHIS
Smoking Prevalence Among Adults 18 & Older, United States, 1965-2010, with Projections
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Summary
www.ctri.wisc.edu