Integrating Tobacco Cessation Support Resources to Improve Patient Access

University of Texas at Austin

Tobacco Research & Evaluation

Presented by: Ashley LeMaistre, MPH

Learning Objectives:

1. Describe the Ask, Advise, Refer workflow
2. Identify benefits of integrating the eTobacco protocol into an electronic medical record
3. Summarize the process of utilizing the Quitline app

Agenda

Definitions & Data
Why?
Texas Quitline
Ask-Advise-Refer Workflow
eTobacco Protocol
Texas Quitline App
Technical Assistance

Tobacco & Nicotine Products

Increasing Access to Tobacco Cessation: Referring to the Texas Quitline

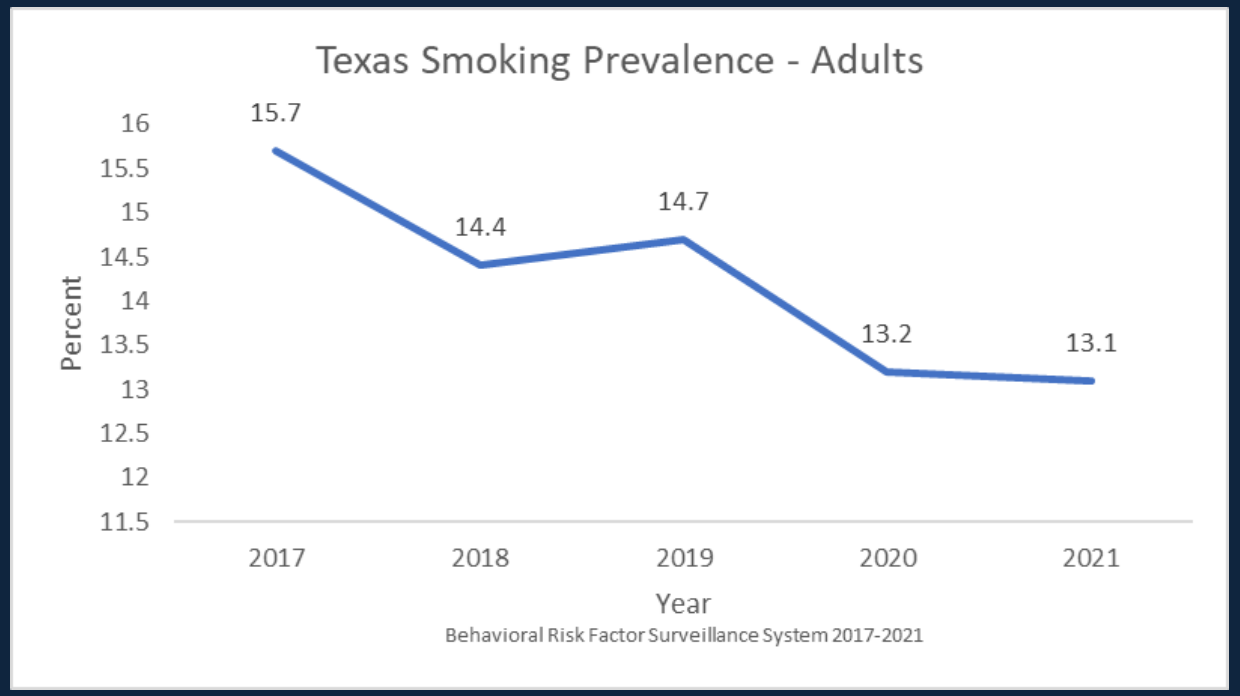
Vaping & Synthetic Nicotine

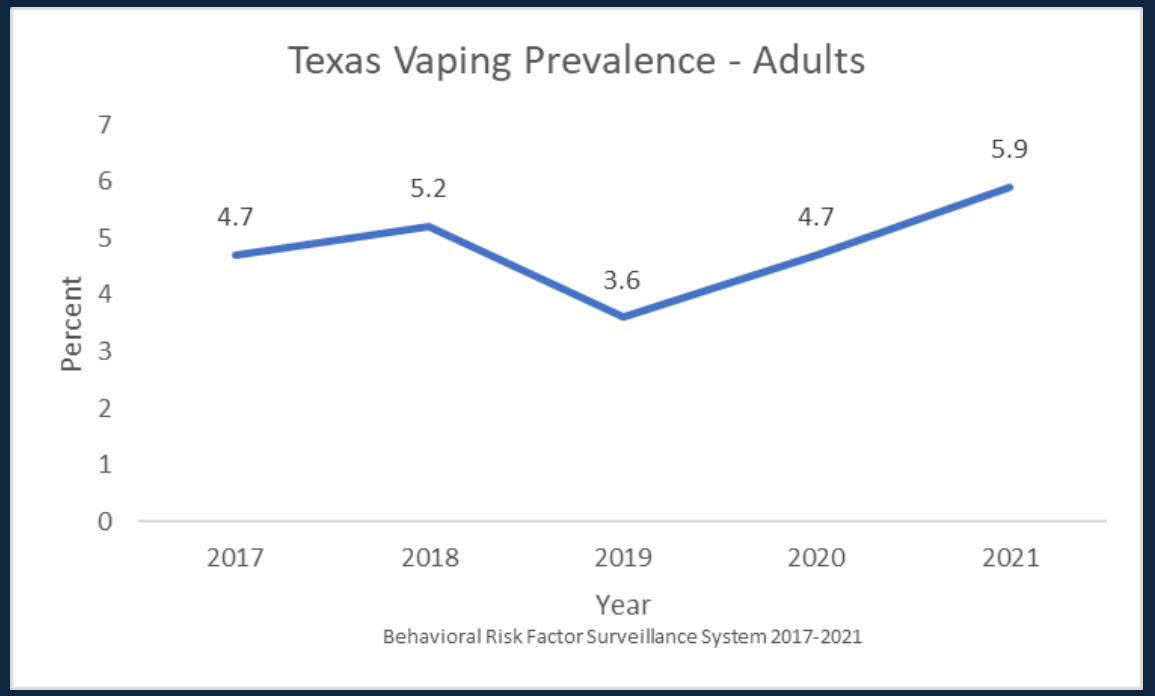
- Electronic Cigarettes
  - Vapes, e-cigarettes, ENDS (electronic nicotine delivery systems)
  - Operate by heating a liquid solution to produce an aerosol that is then inhaled
  - Nicotine levels vary
  - Nicotine salts
- Synthetic Nicotine/Non-Tobacco Nicotine
  - Marketed as “tobacco-free”, but still contain nicotine
  - Regulated by FDA (2022) the same as tobacco-derived nicotine products
  - To date, no approved products on the market
- Dual-use

Tobacco & Oral Health

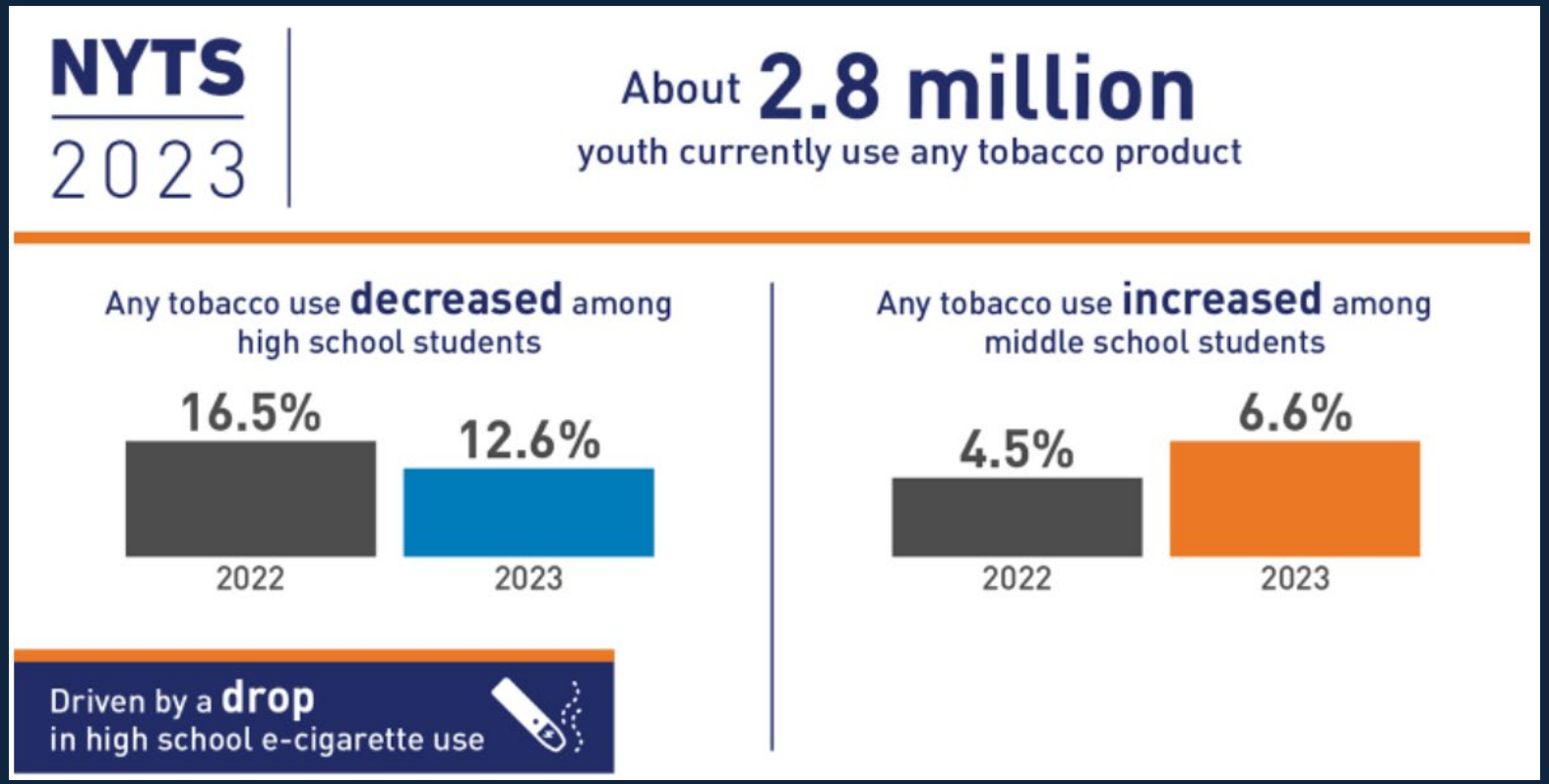
- Tobacco causes oral cancer, gum disease, and other oral health problems.
- Increased risk of periodontitis, peri-implantitis, caries, alveolar osteitis, and halitosis
- Smokeless tobacco
  - Increased risks of oral cancer
  - Can cause leukoplakia inside the mouth
- Vaping
  - May contribute to gum disease, dental caries
  - Creates a unique oral microbiome

Adult Tobacco Use





Youth Tobacco Use



National Youth Tobacco Survey, 2023

Youth Tobacco Use

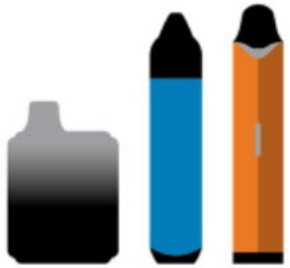
Findings on Youth Use for All Tobacco Products

NYTS 2023

10% of students
reported current use of any tobacco product

Among those who currently use a tobacco product:

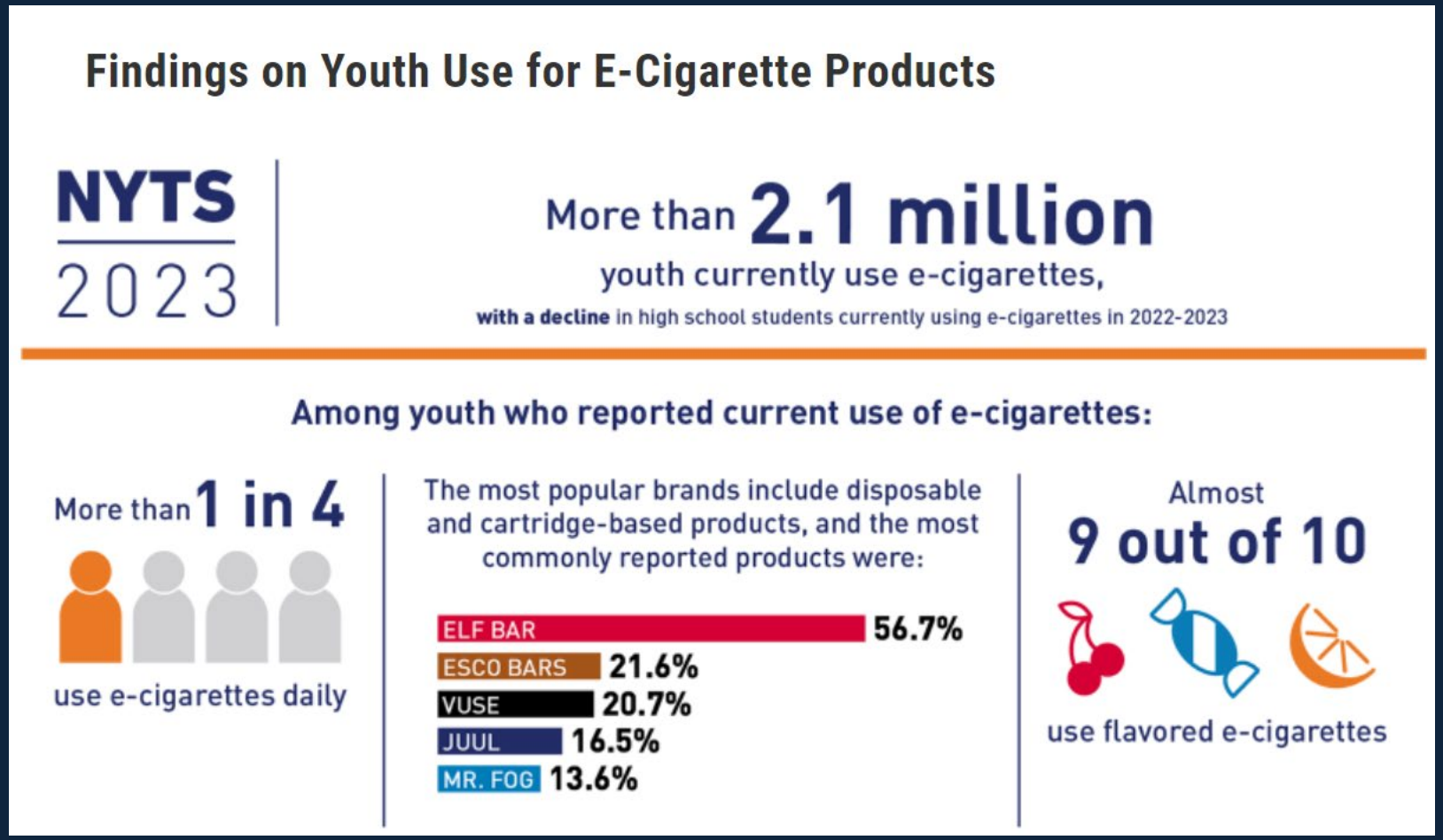
E-Cigarettes
were the most popular product for the
10th year in a row



Cigarette and Cigar
use remain at an all-time low

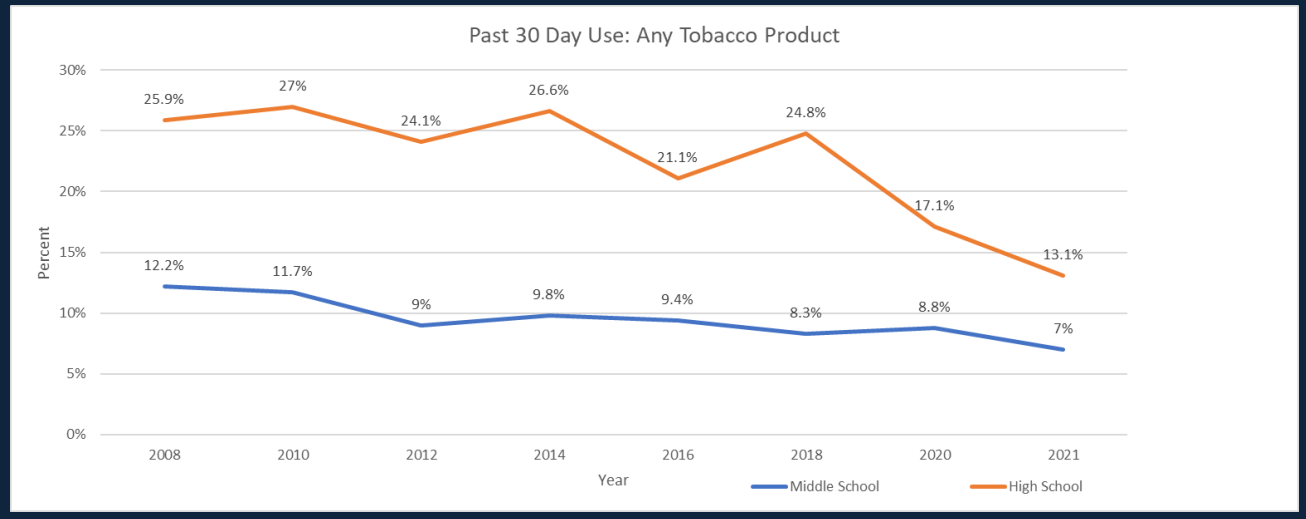
National Youth Tobacco Survey, 2023

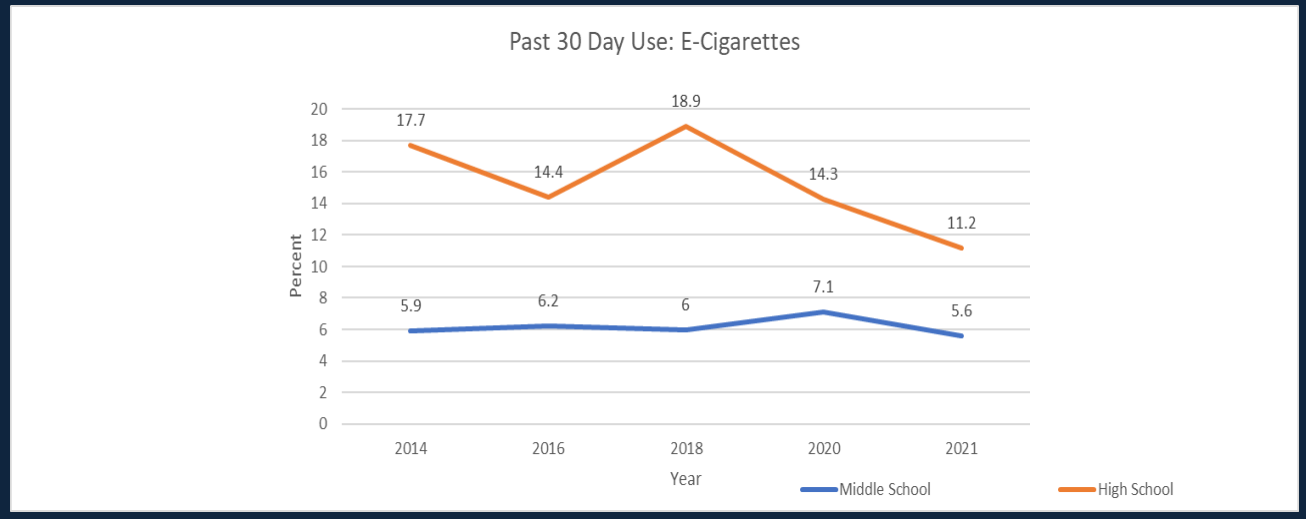
Youth Tobacco Use



National Youth Tobacco Survey, 2023

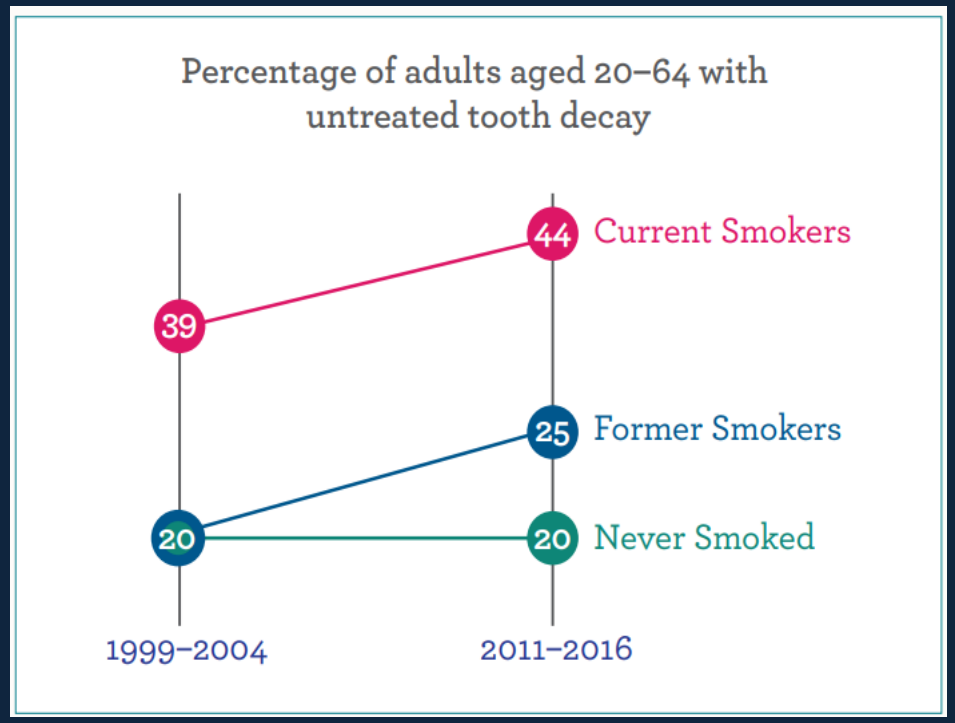
Texas Youth Tobacco Use





Texas Youth Tobacco Survey

Untreated Tooth Decay

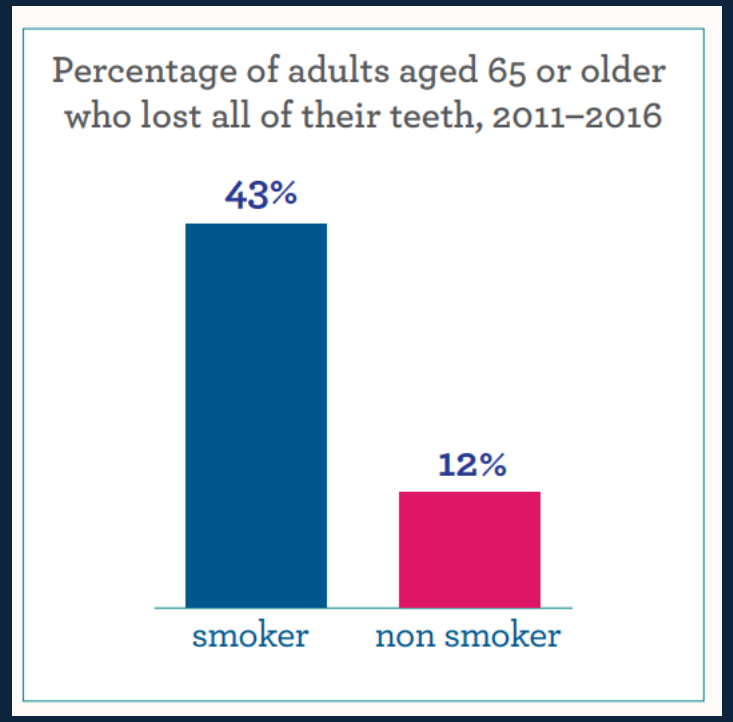


CDC Oral Health Report

Untreated Tooth Decay in Older Adults

CDC Oral Health Report

Tooth Loss



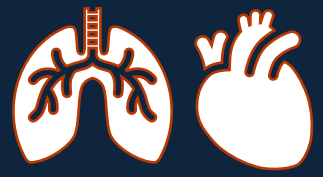
CDC Oral Health Report

Why?

Cigarettes have over 7,000 chemicals, at least 69 of which are known to cause cancer.

Texas loses 28,000 people annually due to cigarette smoking.

Texas loses $34 billion on healthcare costs and lost productivity attributed to tobacco use.



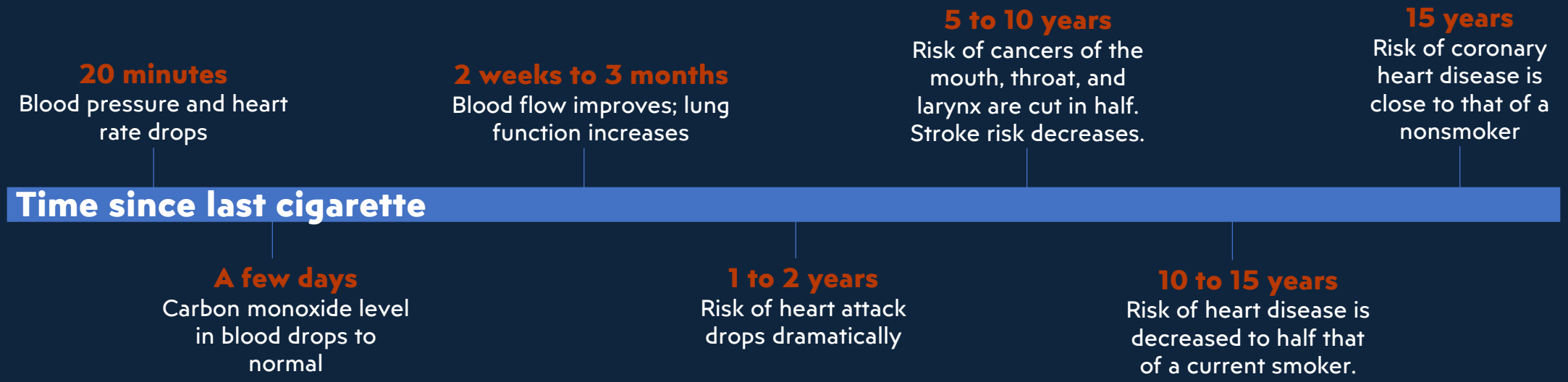
Tobacco use is the leading cause of preventable death and can cause cancer, heart disease, stroke, diabetes, and lung disease.

Tobacco: Impact on Chronic Health Conditions

- Type 2 Diabetes
- HIV
- Substance Use Disorders

Tobacco Myths

Smoking Cessation Benefits Over Time



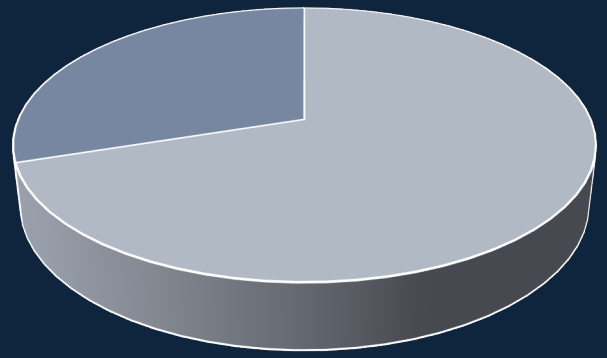
American Cancer Society – Health Benefits of Quitting Smoking Over Time

Highlights: Clinical Practice Guideline *Treating Tobacco Use and Dependence: 2008 Update*

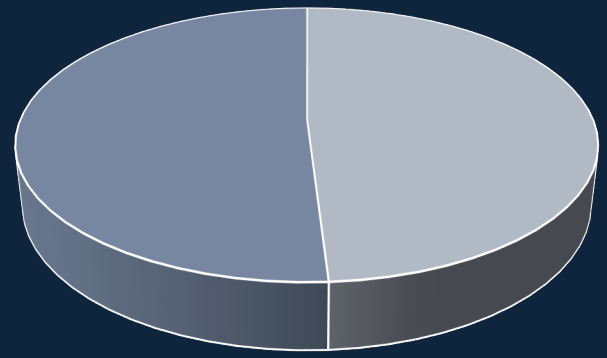
- Tobacco dependence is a chronic disease—often times requiring repeated intervention and quit attempts.
- It is essential for clinicians and healthcare delivery systems to consistently identify and document tobacco use status and treat every tobacco user seen in a healthcare setting.
- Individual, group and telephone counseling are effective.
- Counseling and medication are effective when used by themselves for treating tobacco dependence. However, the combination of counseling and medication is more effective than either alone.
- Telephone Quitline counseling is effective with diverse populations and has broad reach.

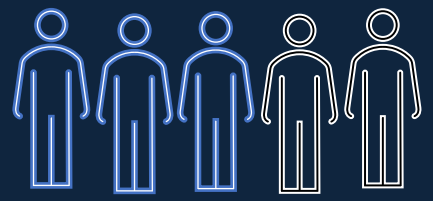
Why?

Nearly 70% of adults who smoke want to quit.



Over 50% of adults who smoke try to quit each year.





3 in 5 adults who ever smoked cigarettes have quit

2020 Surgeon General's Report – Smoking Cessation

Why?

- Patients are 66% more likely to successfully quit tobacco when healthcare providers actively intervene to connect them with FREE services.
- Behavioral counseling and cessation medication interventions can double a patient's chances of quitting, compared with self-help materials or no treatment.
- Healthcare systems aren't consistently collecting data or referring to the Quitline.
- More than 40% of smokers in healthcare settings are NOT receiving tobacco cessation counseling.

Mental Health Myths

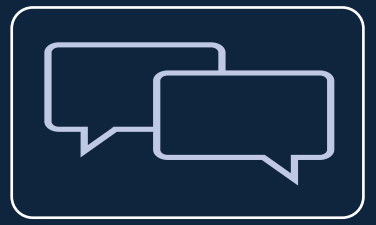
Texas Quitline

- Free services
- Offered in English and Spanish
  - Additional languages through simultaneous interpretation
- Calls answered and counseling available 24/7
- Private & confidential service, HIPAA Compliant

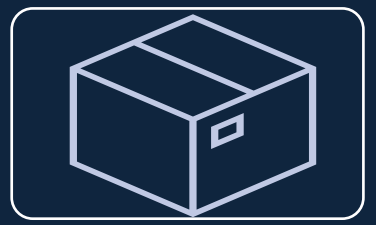
YES QUIT

877-YES-QUIT YESQUIT.ORG

Quitline Benefits



5 counseling sessions for patients 13+



Over-the-counter nicotine replacement therapy for qualified* patients 18+

- Gum, patches, or lozenges
- Mailed to the patient's home

Referrals can be made anytime; Enroll up to 2x/year

*Based on DSHS funding

Texas Quitline

- Qualifications
  - Texas address
  - USA phone number
  - 13 years + for counseling
  - 18 years + for nicotine replacement therapy
  - Ready to quit within 30 days

- Quitline proactively calls patient within 48 hours of referral to set appointments

What Happens After the Referral?

- Call from the Quitline within 48 hours
  - Up to 5 attempts to reach patient
  - Several questions to tailor services to meet patients' needs
  - Quit Coach®
  - 5 telephone coaching sessions (13+)
  - Nicotine Replacement Therapy mailed to the home (18+)

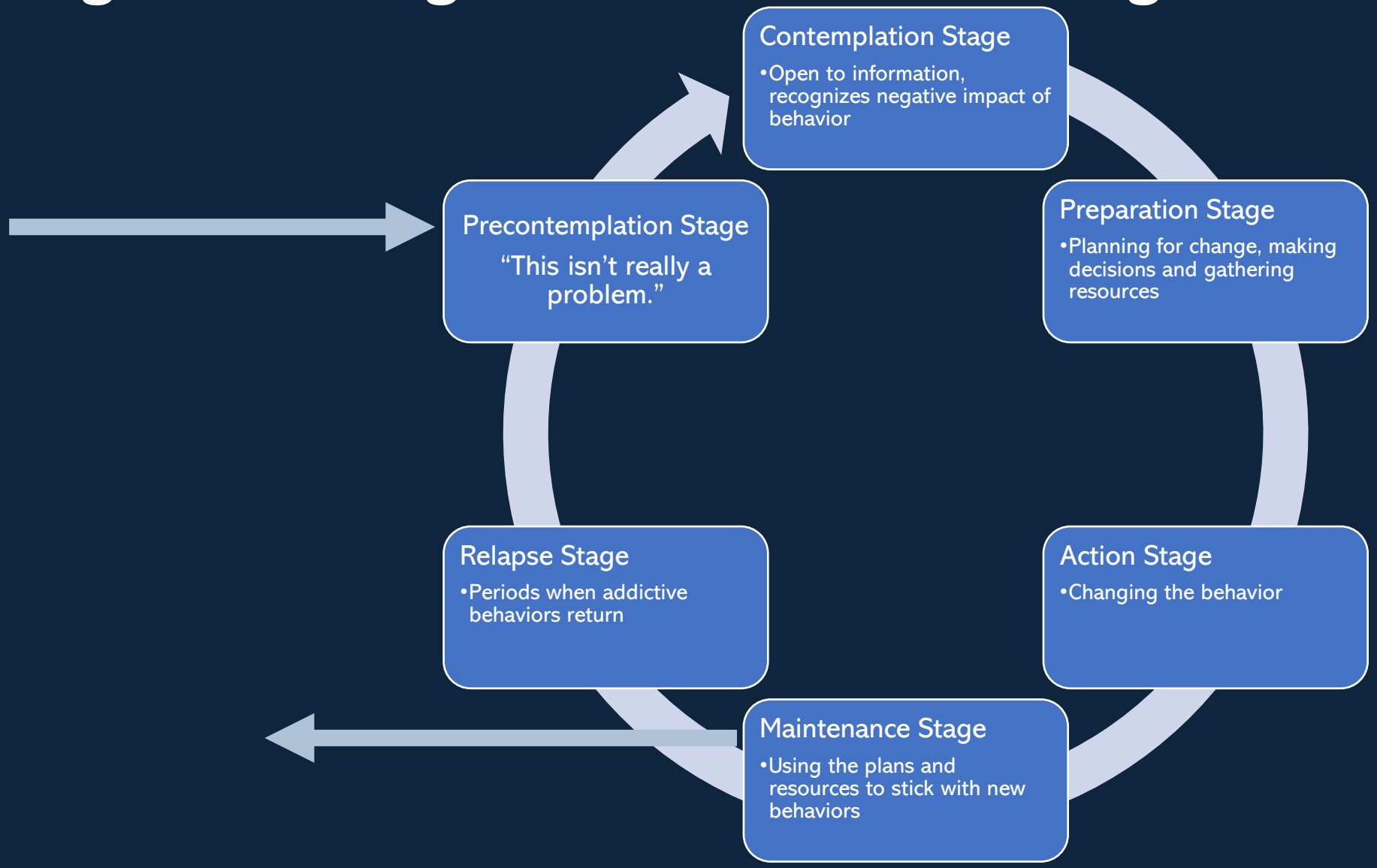
- Quitline Reports
- Progress Notes in EMR (if using Direct Trust Messaging)

Top Barriers to Assessing for Tobacco Use

Lack of Training

Lack of Time

Stages of Change Model of Overcoming Addiction



Ask-Advise-Refer Workflow

Ask if the patient uses tobacco

Advise the patient to quit.

Refer patient to the Quitline..

Ask-Advise-Refer Workflow

ASK – if the patient uses tobacco

- Tobacco use screening of all patients 13 and older
- Tobacco use status is documented in EHR
- If the patient is a tobacco user, the clinical tobacco treatment workflow is activated*

*Clinical team will need to discuss roles and responsibilities for each part of the tobacco treatment workflow. Inform the IT staff of any implications for the EHR.

Ask-Advise-Refer Workflow

ADVISE – the patient to quit.

- Assess the patient's readiness and motivations for quitting
- Assess the patient's barriers to quitting.
- Inform patient of resources available to support quit efforts, including Quitline and any local resources.
- Dose for FDA tobacco cessation medications when appropriate

Ask-Advise-Refer Workflow - ADVISE

Advice should be:

Clear

- "Occasional smoking is still dangerous and harmful for your health."
- "There is no safe level of tobacco use."

Strong

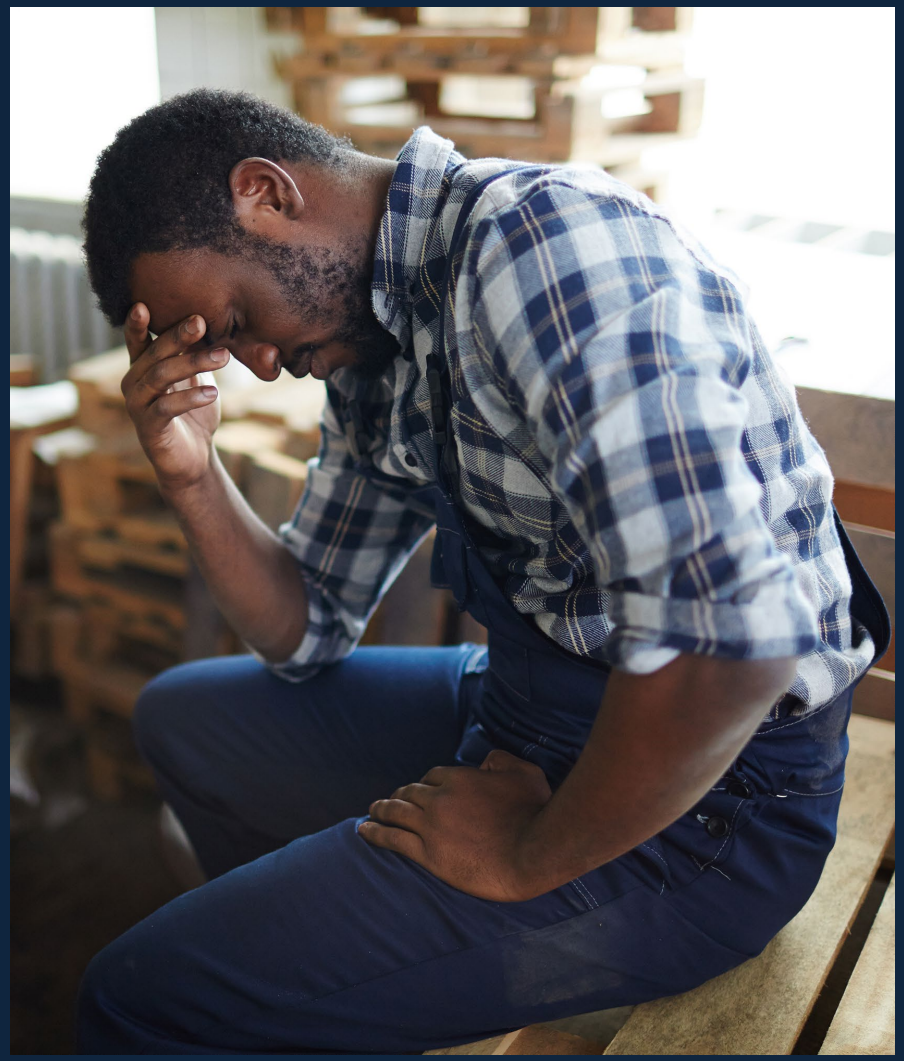
- "As your healthcare provider, I need you to know that quitting tobacco/vaping is the most important thing you can do to protect your health now and in the future. We're here to help you."
- "It's important for you to quit using tobacco/vaping now, and I'm here to support you."

Personalized

- "Continuing to use tobacco/vape makes your asthma worse, and quitting may dramatically improve your health."
- "Quitting smoking may reduce the number of ear infections your child has."

Preparing For Barriers

- Nicotine Withdrawal
  - Cravings
  - Irritability
  - Difficulty sleeping
  - Difficulty concentrating
  - Restlessness
  - Sadness, anxiousness, or Depression
  - Hungry



Ask-Advise-Refer Workflow

REFER – to the Quitline.

- Proactive referral for patients ready to quit within 30 days.
- Provide patient with any written materials to encourage or support
- Healthcare systems can receive patient progress notes

Recommended Questions To Ask

ASK: Have you ever used any form of tobacco? Have you ever vaped/used an electronic cigarette?

- No
- Yes

Are you currently using any tobacco products or vaping (within the last 30 days)?

- No
- Yes

What types of tobacco products are you currently using? (check all that apply)

- Cigarettes
- Electronic Cigarettes
- Smokeless Tobacco
- Hookah
- Pipe
- Other (specify)

ADVISE: Provide brief cessation advice.

REFER: Are you ready and interested in quitting in the next 30 days?

- No
- Yes

Do you give permission to be contacted for tobacco cessation counseling (Texas Quitline)

Contact time – When are good weekend times to call?

- ❑ Mornings 8am-12pm
- ❑ Afternoons 12pm-4pm
- ❑ Evenings 4pm-8pm

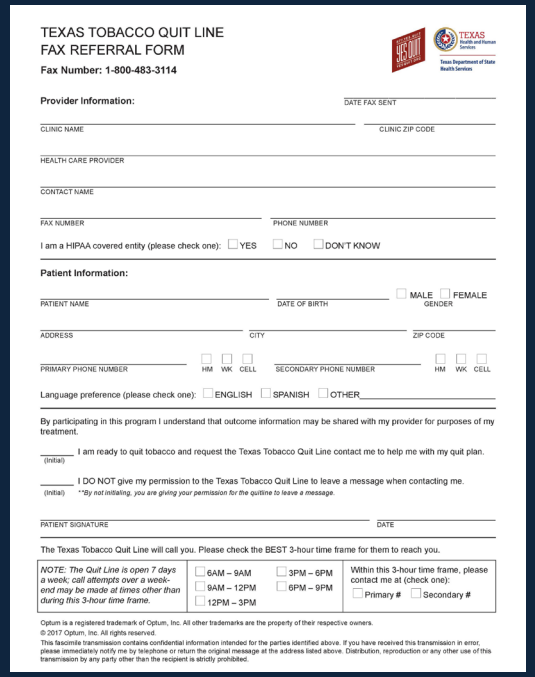
Do you give permission to receive text messages from the Texas Quitline?

Contact time – When are good weekday times to call?

- ❑ Mornings 8am-12pm
- ❑ Afternoons 12pm-4pm
- ❑ Evenings 4pm-8pm

Texas Quitline Referral Methods

- Paper-based fax referral
  - YesQuit.org
- eTobacco Protocol
  - Through EMR/EHR
- App referral
  - Texas Quitline



TEXAS TOBACCO QUIT LINE
FAX REFERRAL FORM

Fax Number: 1-800-483-3114

Provider Information:

DATE FAX SENT

CLINIC NAME | CLINIC ZIP CODE

HEALTH CARE PROVIDER

CONTACT NAME

FAX NUMBER | PHONE NUMBER

I am a HIPAA covered entity (please check one): ☐ YES ☐ NO ☐ DON'T KNOW

Patient Information:

PATIENT NAME | DATE OF BIRTH | ☐ MALE ☐ FEMALE GENDER

ADDRESS | CITY | ZIP CODE

PRIMARY PHONE NUMBER ☐ HM ☐ WK ☐ CELL | SECONDARY PHONE NUMBER ☐ HM ☐ WK ☐ CELL

Language preference (please check one): ☐ ENGLISH ☐ SPANISH ☐ OTHER

By participating in this program I understand that outcome information may be shared with my provider for purposes of my treatment.

_____ (Initial) I am ready to quit tobacco and request the Texas Tobacco Quit Line contact me to help me with my quit plan.

_____ (Initial) I DO NOT give my permission to the Texas Tobacco Quit Line to leave a message when contacting me.
**By not initialing, you are giving your permission for the quitline to leave a message.*

PATIENT SIGNATURE | DATE

The Texas Tobacco Quit Line will call you. Please check the BEST 3-hour time frame for them to reach you.

NOTE: The Quit Line is open 7 days a week; call attempts over a week-end may be made at times other than during this 3-hour time frame.	☐ 6AM – 9AM ☐ 9AM – 12PM ☐ 12PM – 3PM ☐ 3PM – 6PM ☐ 6PM – 9PM	Within this 3-hour time frame, please contact me at (check one): ☐ Primary # ☐ Secondary #

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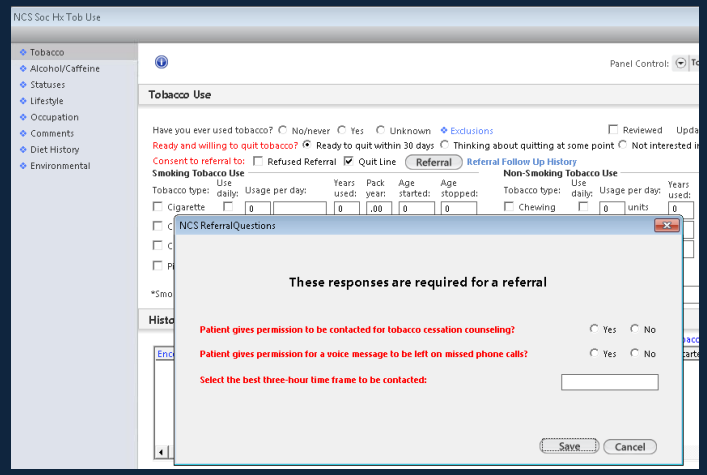
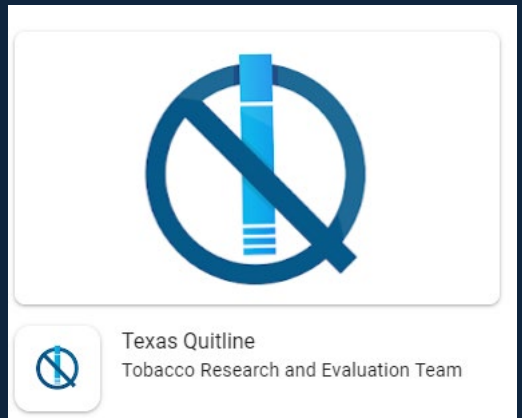




eTobacco Protocol

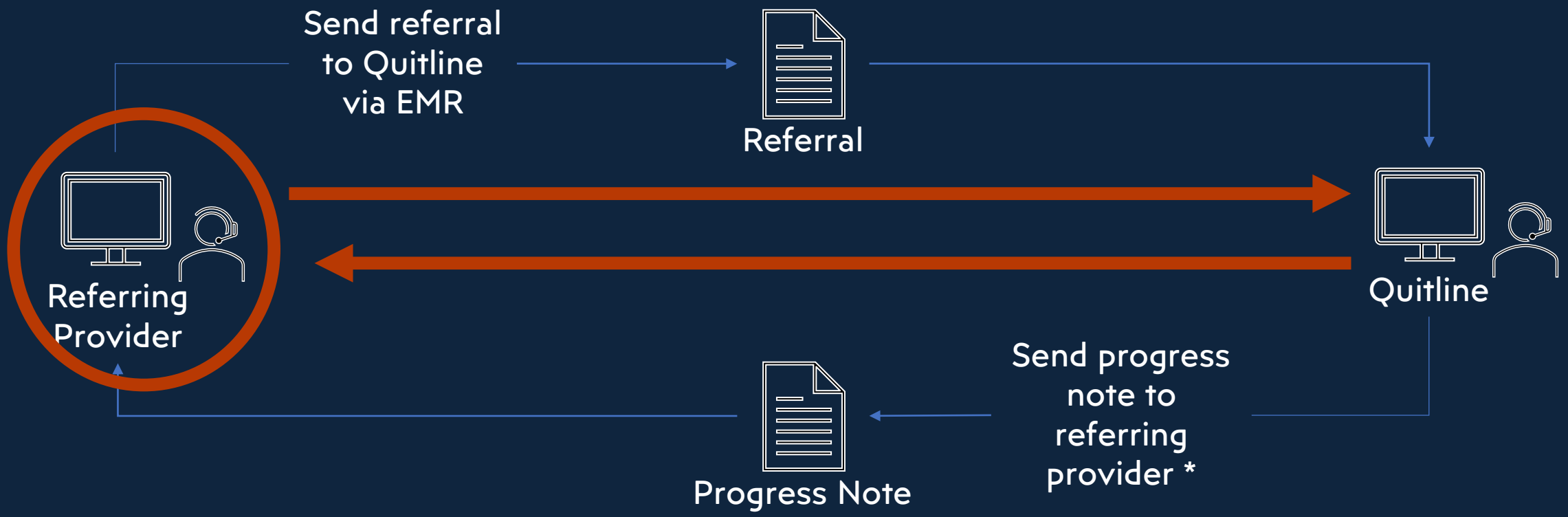
Goal: Seamless link between assessing for tobacco use, identifying patients interested in quitting in the next 30 days, and access to Quit resources.

- Identify electronic health record (EHR)/electronic medical record (EMR) platform
- Technical support
- Training
- Implementation
- Follow-up

eTobacco Protocol

- Benefits:
  - Efficient counseling and referral option
  - Quitline proactively connects with patients
  - Feedback to EHR (bidirectional Transmission)
  - HIPAA Compliant
  - Technical assistance
  - Systemwide Public Health impact
  - Revenue: Meet Tobacco Cessation Quality Control Measures
  - Eradicate the #1 cause of preventable death
  - Protect adults and children

eTobacco Protocol



*For HIPAA-compliant entities

Adapted from Denver Public Health – Local Public Health E-Referral Toolkit

Texas Quitline App

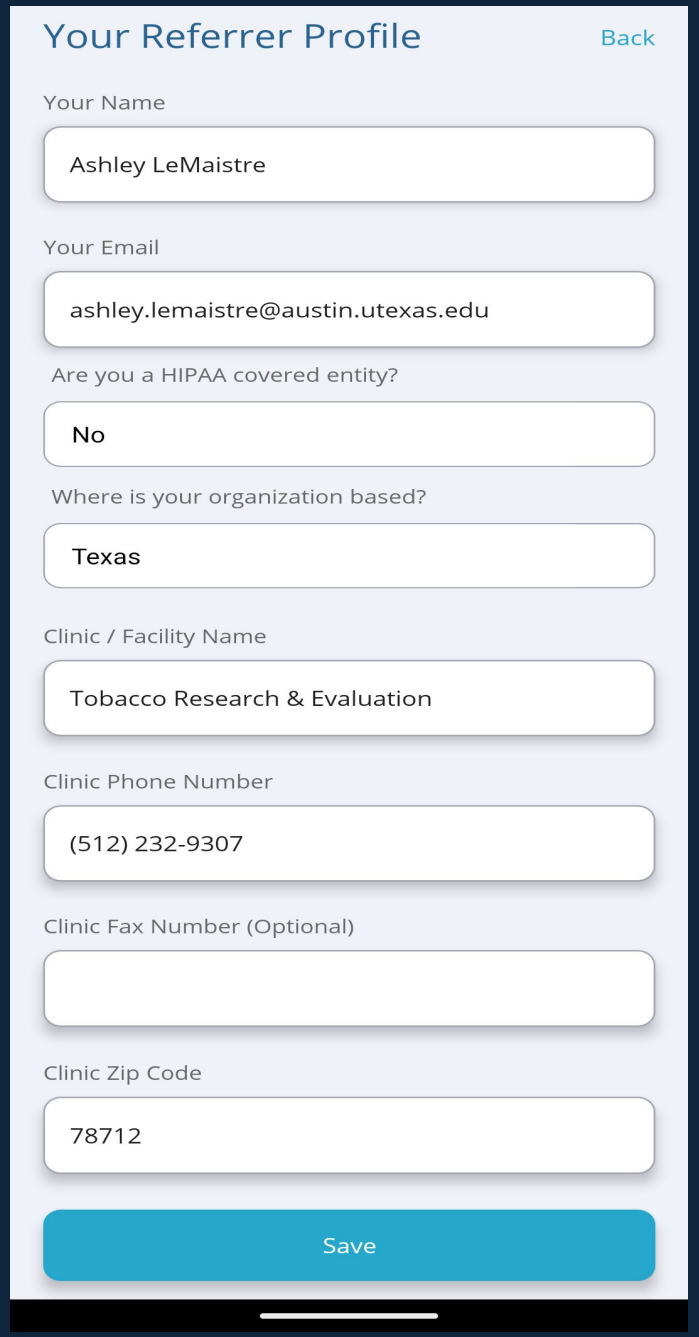
- Available - free
- Available on both Android and Apple platforms
- Easy to use for Community Health Workers and mobile staff
- Nice alternative if the eTobacco protocol is not available
- HIPAA-compliant

Download on the App Store

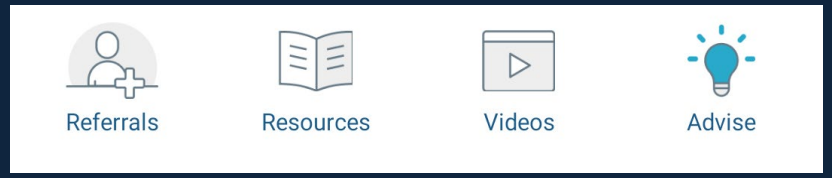
ANDROID APP ON Google play

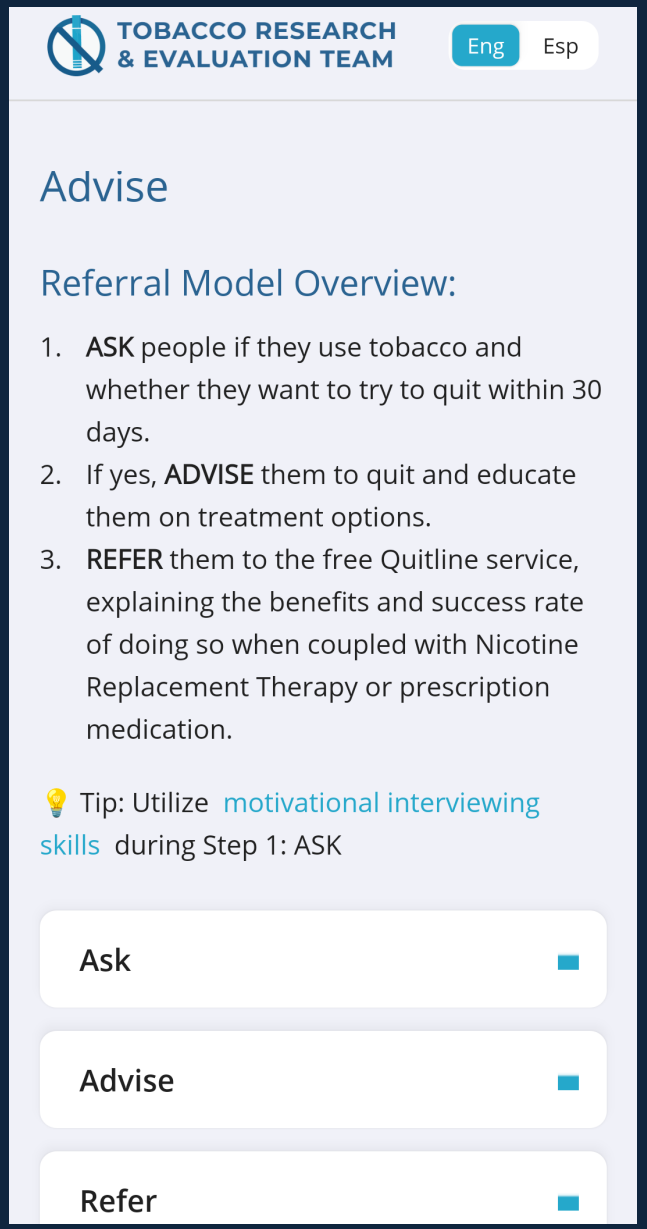
Provider Profile

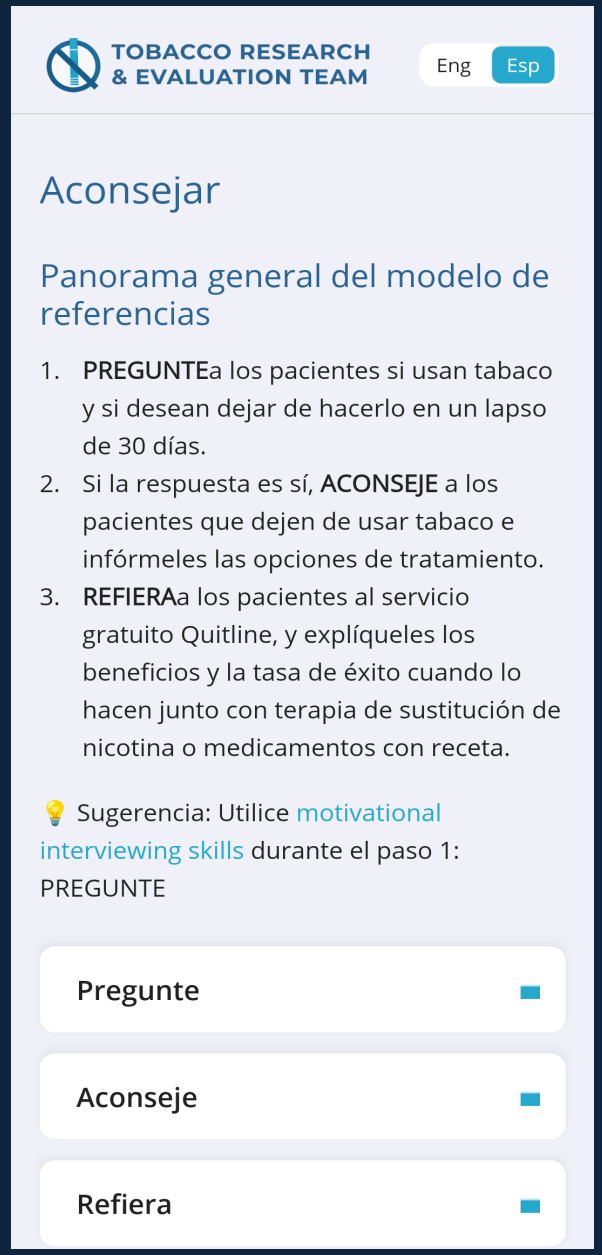
***1-time Set-up**



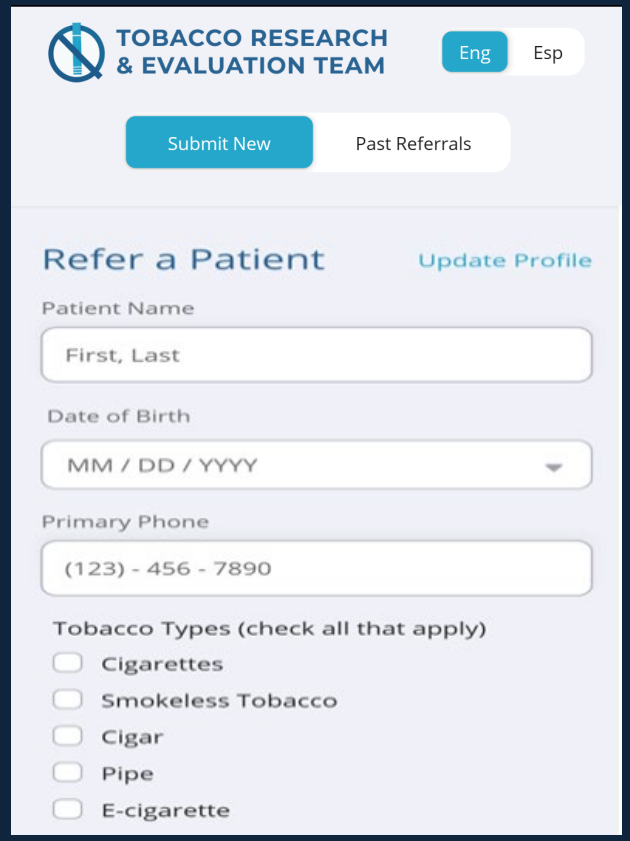
App Screen Shots

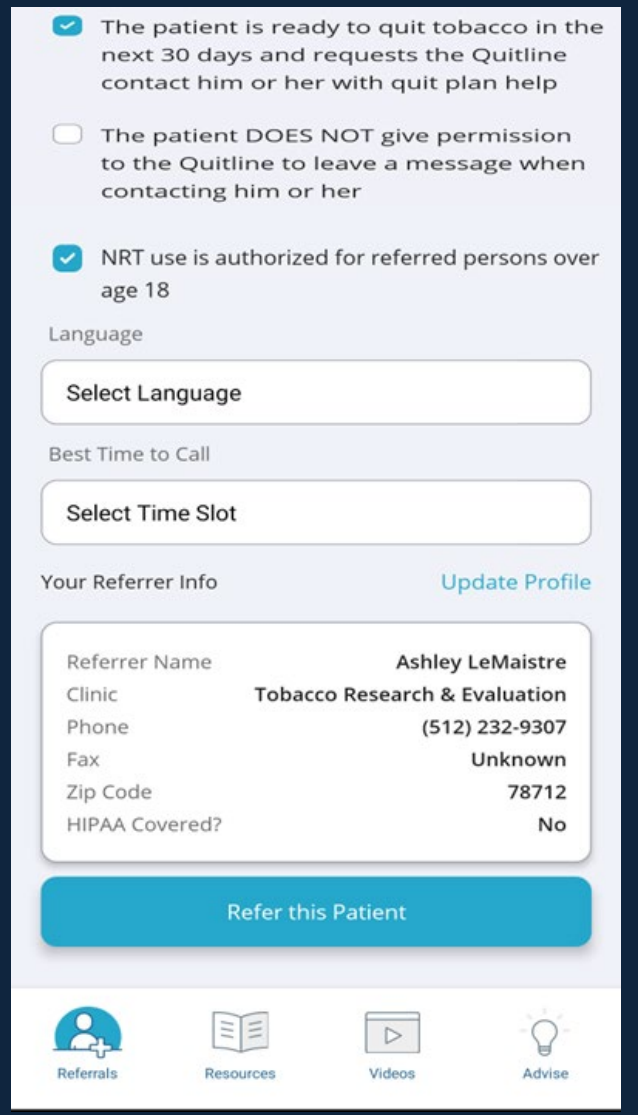




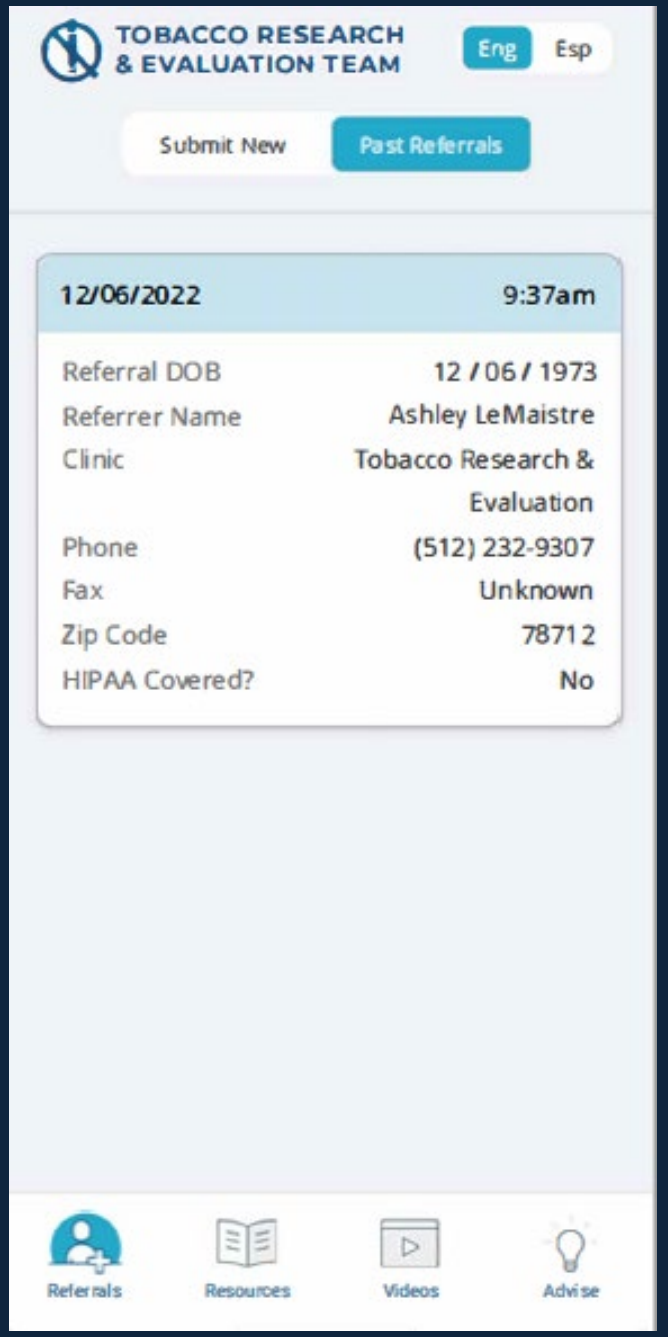


Patient Information

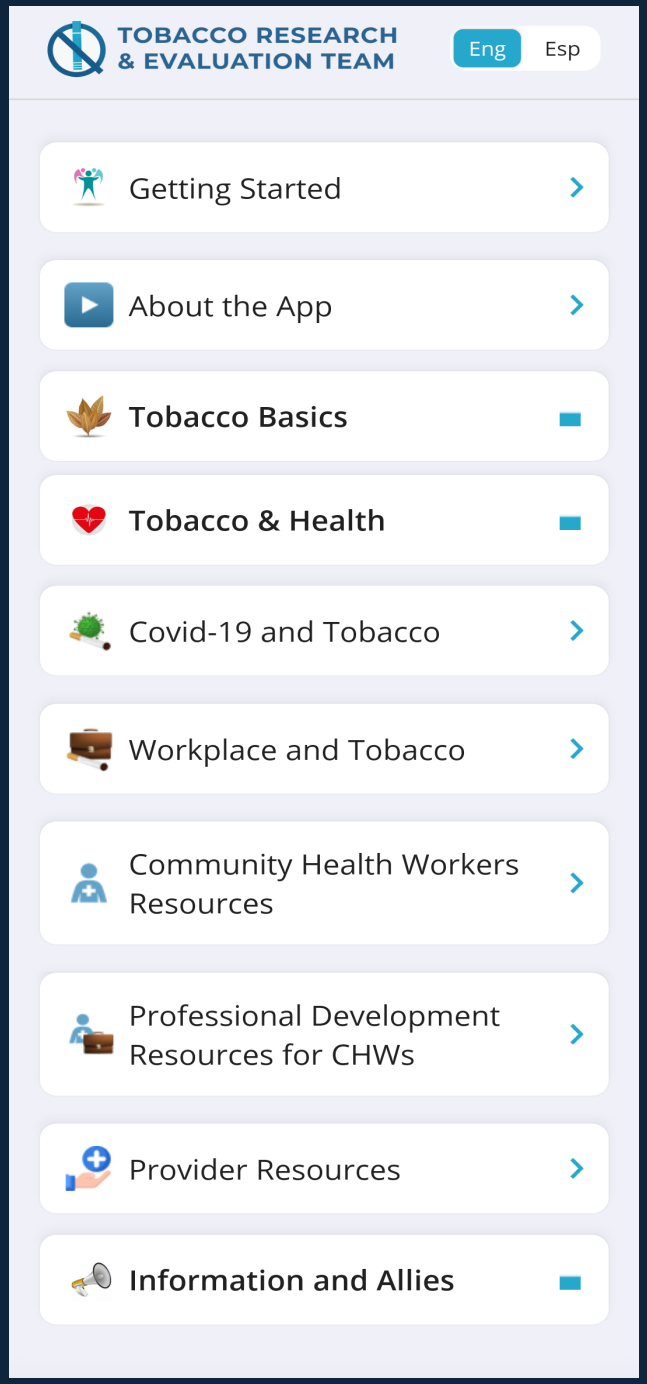




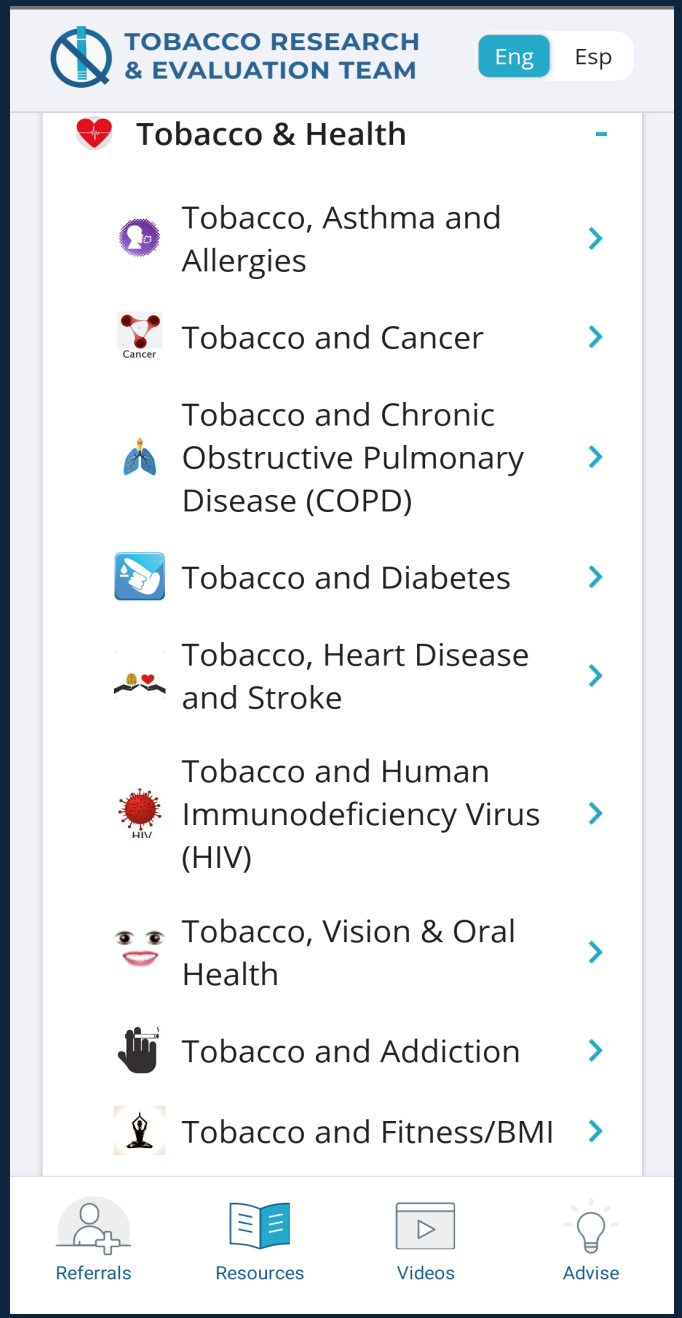
Referral Documentation



Main Menu

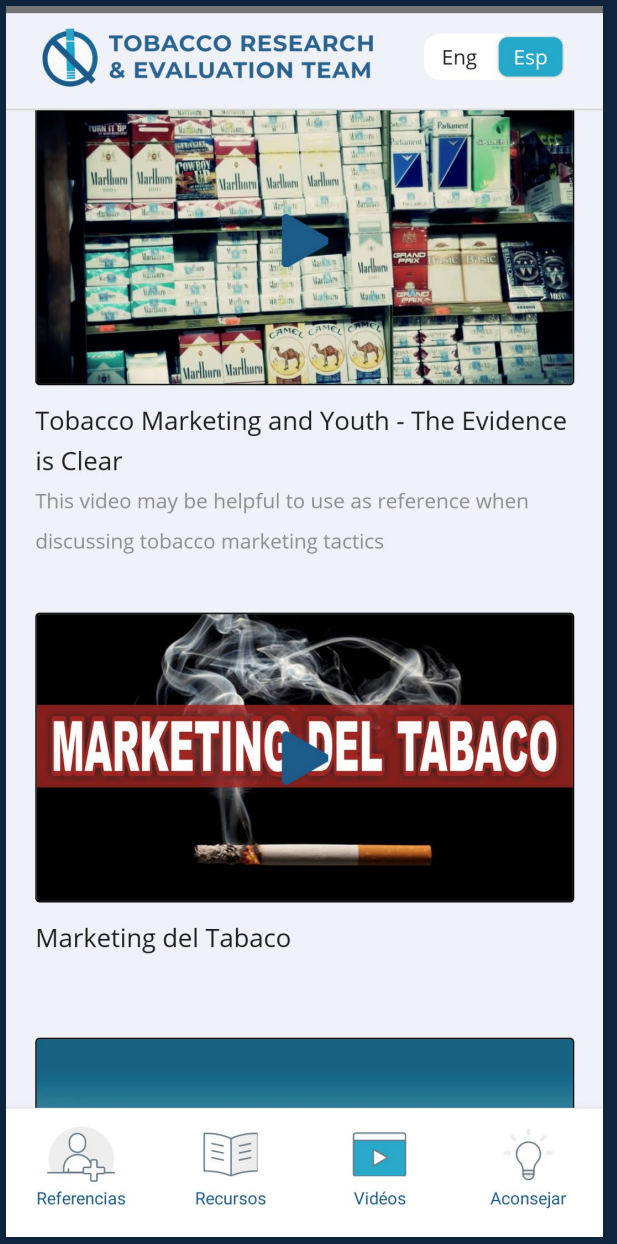

TOBACCO RESEARCH & EVALUATION TEAM
Eng
Esp
Getting Started
About the App
Tobacco Basics
Tobacco & Health
Covid-19 and Tobacco
Workplace and Tobacco
Community Health Workers Resources
Professional Development Resources for CHWs
Provider Resources
Information and Allies

Tobacco and Your Health Menus



Videos

TOBACCO RESEARCH & EVALUATION TEAM
Eng
Esp
Videos
Motivational Interviewing
An INtroduction
Bill Matulich, Ph.D.
member of the
Introduction to Motivational Interviewing
You will rely on your communication skills. Practice and further develop your communication skills by engaging motivational interviewing and message tailoring skills.
MOTIVATIONAL INTERVIEWING
How do you have patient-centered conversations?
How do you have patient-centered
Referrals
Resources
Videos
Advise


TOBACCO RESEARCH & EVALUATION TEAM
Eng
Esp
Tobacco Marketing and Youth - The Evidence is Clear
This video may be helpful to use as reference when discussing tobacco marketing tactics
MARKETING DEL TABACO
Marketing del Tabaco
Referencias
Recursos
Vidéos
Aconsejar

Technical Assistance

Exploration & Training

- Host informational conference call with decision makers
- Workflow planning
- Training for healthcare professionals and Community Health Workers
- Continued maintenance support after integration

Quitline Referral

- Technical support to assist with implementing the electronic tobacco referral through the EMR
- $4000 mini grant opportunities during testing phase*
- Share monthly report for referrals made from Quitline

Patient Material

- Handout for patients on what to expect after a referral is made
- Various tobacco prevention handouts

*Based on funding

Billing/Coding for Tobacco Cessation and Counseling

- Covered by Medicare, Medicaid, and most private health plans

What is Covered?

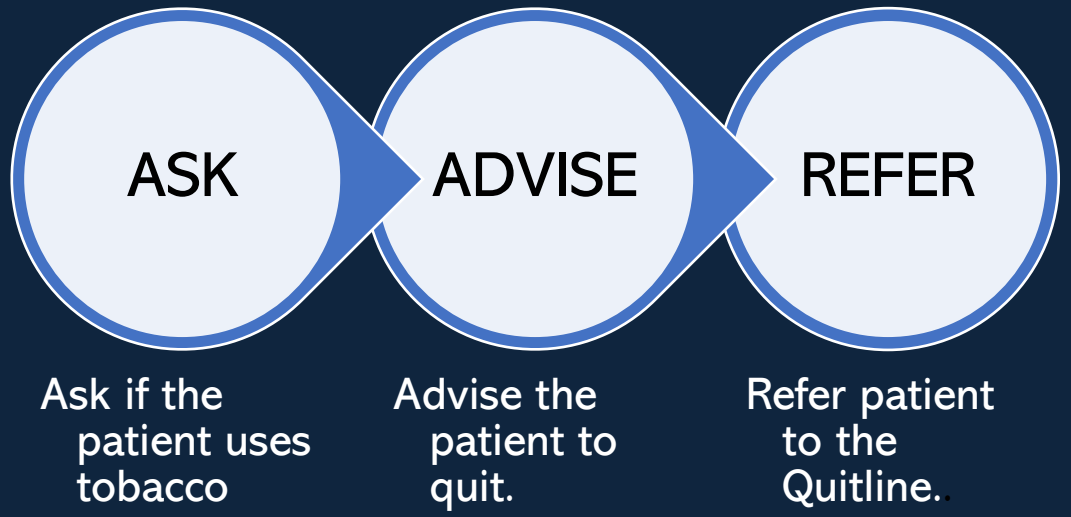
Patients and providers should check with individual Medicaid, MCO and private insurance plans to determine what specific treatments are included and the extent to which these treatments are covered. Questions to ask payers would include:

1. Are both individual and group counseling covered?
2. Are there limits on the number of counseling sessions (either individual or group)?
3. Are there any restrictions on what provider types may bill for counseling? (MD, NP, PA, etc.)
4. Are there specific notes that must be included in documentation for counseling?
5. Is there coverage for nicotine replacement therapy (patch, gum, inhaler)?
   Can it be over the counter or must it be prescription to be covered?
6. Is there coverage for bupropion? Is there coverage for varenicline?
7. Are there any prior authorization or step therapy requirements?
8. How many fills are allowed per patient per year?
9. What should my patient expect in terms of cost sharing?

American Lung Association, 2021

Highlights

- Document **every** patients' tobacco use status
- Counseling and medication, when **combined**, are **more** effective and give patients the **best** chance of quitting and **staying** quit.
- Texas Quitline is free and offers 5 free counseling sessions (13+) and free nicotine replacement therapy (18+)



- Referrals can be sent via: Fax, eTobacco protocol through EMR, Texas Quitline app

Resources

- Agency for Healthcare Research and Quality. Treating Tobacco Use and Dependence: 2008 Update: https://www.ahrq.gov/prevention/guidelines/tobacco/index.html
- American Lung Association. Billing Guide for Tobacco Screening and Cessation April 2021: https://www.lung.org/getmedia/08ed3536-6bab-48a6-a4e4-e6dbccaea024/billing-guide-for-tobacco-1.pdf.pdf
- Free Tobacco Prevention brochures: https://www.yesquit.org/materials.htm
- University of Texas at Austin Tobacco Research & Evaluation
  - Healthcare Resources: https://www.uttobacco.org/healthcare
  - Patient print materials & additional links: https://www.uttobacco.org/resources

Make a COMMITMENT…

Address tobacco use

with all patients.

At a minimum,

make a commitment to incorporate brief tobacco interventions as part of routine patient care.

Ask, Advise, and Refer.

Thank you

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