



COVERAGE FOR TOBACCO CESSATION

June 2019

Tobacco Cessation

DID YOU KNOW?

- ❖ Tobacco use is the leading cause of preventable disease, disability, and death in the United States
- ❖ Each year, nearly half a million Americans die prematurely of smoking or exposure to secondhand smoke.
- ❖ Leading cause of preventable deaths
- ❖ For every person who dies because of smoking, at least 30 people live with a serious smoking-related illness.
- ❖ On average, smokers die 10 years earlier than nonsmokers.

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DID YOU KNOW?

- ❖ Nearly 40 million U.S. adults still smoke cigarettes, and about 4.7 million middle and high school students use at least one tobacco product, including e-cigarettes.
- ❖ Smoking leads to disease and disability and harms nearly every organ of the body
- ❖ Smoking causes cancer, heart disease, stroke, lung diseases, diabetes, and chronic obstructive pulmonary disease (COPD), which includes emphysema and chronic bronchitis.
- ❖ Smoking also increases risk for tuberculosis, certain eye diseases, and problems of the immune system, including rheumatoid arthritis.
- ❖ Smoking is a known cause of erectile dysfunction in males.

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DID YOU KNOW?

- ❖ Missouri is in the top ten nationwide for adult tobacco use.

- ❖ According to 2017 data 20.8% of adults¹ and more than 9.2% of high school students² in Missouri use tobacco.

- ❖ According to 2017 data 50.2% of adult Medicaid members use tobacco¹.

- ❖ Smoking rates are also high among pregnant women in Missouri.
 - *In 2016 the national rate for pregnant women using tobacco is 7.2% and for Missouri the rate is 15.3%.³*
 - *Smoking during pregnancy increases the risk for preterm delivery, stillbirth, low birth weight and sudden infant death syndrome.*

¹ Missouri Department of Health and Senior Services (MO DHSS) 2018 Behavioral Health Risk Factor Surveillance Survey (BRFSS).

² Missouri Department of Health and Senior Services (MO DHSS) 2017 Youth Risk Behavioral Health Survey (YRBSS) and Youth Tobacco Survey (YTS).

³ MO DHSS, MOPHIMS - Birth MICA, <https://webapp01.dhss.mo.gov/MOPHIMS/MICAHome> US: CDC, NCHS. National Vital Statistics. <https://www.cdc.gov/nchs/products/databriefs/db305.htm>

Tobacco Screening & Assessment (5As)

- ❖ Ask about tobacco use – All patients should be screened for tobacco use at every visit.
- ❖ Advise to quit – All physicians should strongly advise every patient who uses tobacco to quit.
- ❖ Assess willingness to quit – Once identified as a tobacco uses, willingness to quit should be assessed.
- ❖ Assist in quit attempt – offer medication and provide or refer for additional treatment; for patients unwilling to quit, provide interventions designed to increase future quit attempts (e.g., motivational interviewing).
- ❖ Arrange follow-up – For patients willing to quit, arrange follow-up contacts, beginning the first week after quit date; for patients unwilling to quit, address tobacco dependence and willingness to quit at next visit.

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What does MHD cover?

- ❖ Evidence indicates that providers can make a difference with even minimal (less than 3 minutes) behavioral interventions.
- ❖ MHD will cover certain medications and behavioral interventions for MHD covered participants.
 - ❖ *See your benefit package for coverage availability*
- ❖ MHD covers unlimited quit attempts per lifetime.

PHARMACOLOGIC INTERVENTIONS

BRAND NAME	GENERIC NAME
Nicorette Gum	Nicotine Gum
Nicotrol Inhaler	Nicotine Inhaler
Nicorette Lozenge	Nicotine Lozenge
Nicotrol NS	Nicotine Nasal Spray
Nicoderm	Nicotine Patch
Chantix	Varenicline
Zyban/Wellbutrin	Bupropion SR

Pharmacologic intervention is reimbursed through the MHD Pharmacy Program.

BEHAVIORAL INTERVENTIONS

- ❖ Smoking and tobacco use cessation counseling visit; intermediate is classified as greater than 3 minutes and up to 10 minutes face-to-face with the patient.
- ❖ Intensive counseling is classified as greater than 10 minutes face-to-face with the patient.
- ❖ Reimbursement rate differs from physicians vs social workers/counselors.
- ❖ No Prior Authorization required for Tobacco Cessation services

Current Procedural Terminology (CPT®) codes should be used to bill for the behavioral intervention (see Behavioral Health Services Provider Manual at http://manuals.momed.com/collections/collection_psy/print.pdf and Billing Book at <http://dss.mo.gov/mhd/providers/education/behavioral-health/index.htm>):

Tobacco Cessation Program Service

- ❖ Reimbursement is limited to one session per day. The behavioral intervention must be face-to-face with the patient, which can include telehealth.
- ❖ The behavioral intervention is included in the global fee for prenatal/delivery/post-partum care billed by physicians and nurse midwives and should not be billed separately.
- ❖ Participants enrolled in a MO HealthNet Managed Care Health Plan receive the smoking cessation pharmacologic and behavioral interventions on a fee-for service basis outside of the Managed Care benefit package.

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- ❖ More information on coverage can be found in section 13.10.H. of the Behavioral Health Services Manual.
http://manuals.momed.com/collections/collection_psy/print.pdf

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How will this help my patient?

- ❖ The combination of behavioral intervention & medication is more effective than either alone
- ❖ Behavioral interventions should include both support/encouragement and practical counseling, such as problem-solving skills/skills training
- ❖ Even behavioral counseling lasting less than 3 minutes increases abstinence rates
- ❖ Because of the serious risks of smoking to the pregnant smoker and the fetus, whenever possible pregnant smokers should be offered person-to-person psychosocial interventions that exceed minimal advice to quit

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How will this help my patient?

- ❖ Longer behavioral counseling sessions increase abstinence rates further
- ❖ Providing four or more sessions of behavioral counseling is especially effective in increasing abstinence rates
- ❖ Use of telephone quit lines is effective in increasing abstinence rates
- ❖ Use of educational materials tailored to the individual, both print and web-based appear to be effective in increasing abstinence rates

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- ❖ Missouri offers FREE help to smokers who want to quit using tobacco

- ❖ Those eligible for this service include:

 - Youth (Only cessation can be provided)

 - Pregnant women

 - Adults

<http://health.mo.gov/living/wellness/tobacco/smokingandtobacco/>

- ❖ Missouri Tobacco Quitline provides counseling, information & referrals

 - ❖ 800-784-8669 or register online at www.quitnow.net/missouri

 - ❖ Live representatives answer 24-7