

Louisiana Tobacco Cessation: Implementing Referrals and Leveraging Resources Workshop

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Learning Objectives

- At the end of this lecture attendees will be able to:
 - Describe the burden of tobacco use
 - List system intervention strategies to treat tobacco use
 - Recall the clinical 5A's model for treating tobacco use, along with variations of the model
 - Identify evidence-based patient interventions for tobacco cessation





The Burden of Tobacco Use

Types of Tobacco

- Smoked Tobacco
 - Cigarettes
 - Cigars
 - Pipes
 - Kreteks
 - Bidis
 - Electronic cigarettes
- Smokeless Tobacco
 - Chew
 - Snuff (moist and dry)



Nicotine Effects

Neurotransmitters

- Dopamine
- Norepinephrine
- Acetylcholine
- Glutamate
- Endorphin
- GABA
- Serotonin

Effect

- Pleasure, reward
- Arousal, appetite suppression
- Arousal, cognitive enhancement
- Learning, memory enhancement
- Reduction of anxiety and tension
- Reduction of anxiety and tension
- Mood modulation, appetite suppression



Addictive Nature of Nicotine

- Nicotine is:
 - 1000 X more potent than alcohol
 - 10-100 X more potent than barbiturates
 - 5-10 X more potent than cocaine or morphine
 - As addictive as heroin (as a mood & behavior altering agent).



Chronic Nature of Tobacco Use

- Treating tobacco use and dependence requires ongoing care rather than acute care
- Many smokers typically go through several periods of relapse for many years
- Failing to recognize the chronic nature of tobacco dependence undercuts need for consistent treatment



Nicotine Withdrawal Effects

- Depression
- Insomnia
- Irritability/frustration/anger
- Anxiety
- Difficulty concentrating
- Restlessness
- Increased appetite/weight gain
- Cravings



COMPOUNDS in TOBACCO SMOKE

An estimated 4,800 compounds in tobacco smoke,
including 11 proven human carcinogens

Gases

- Carbon monoxide
- Hydrogen cyanide
- Ammonia
- Benzene
- Formaldehyde



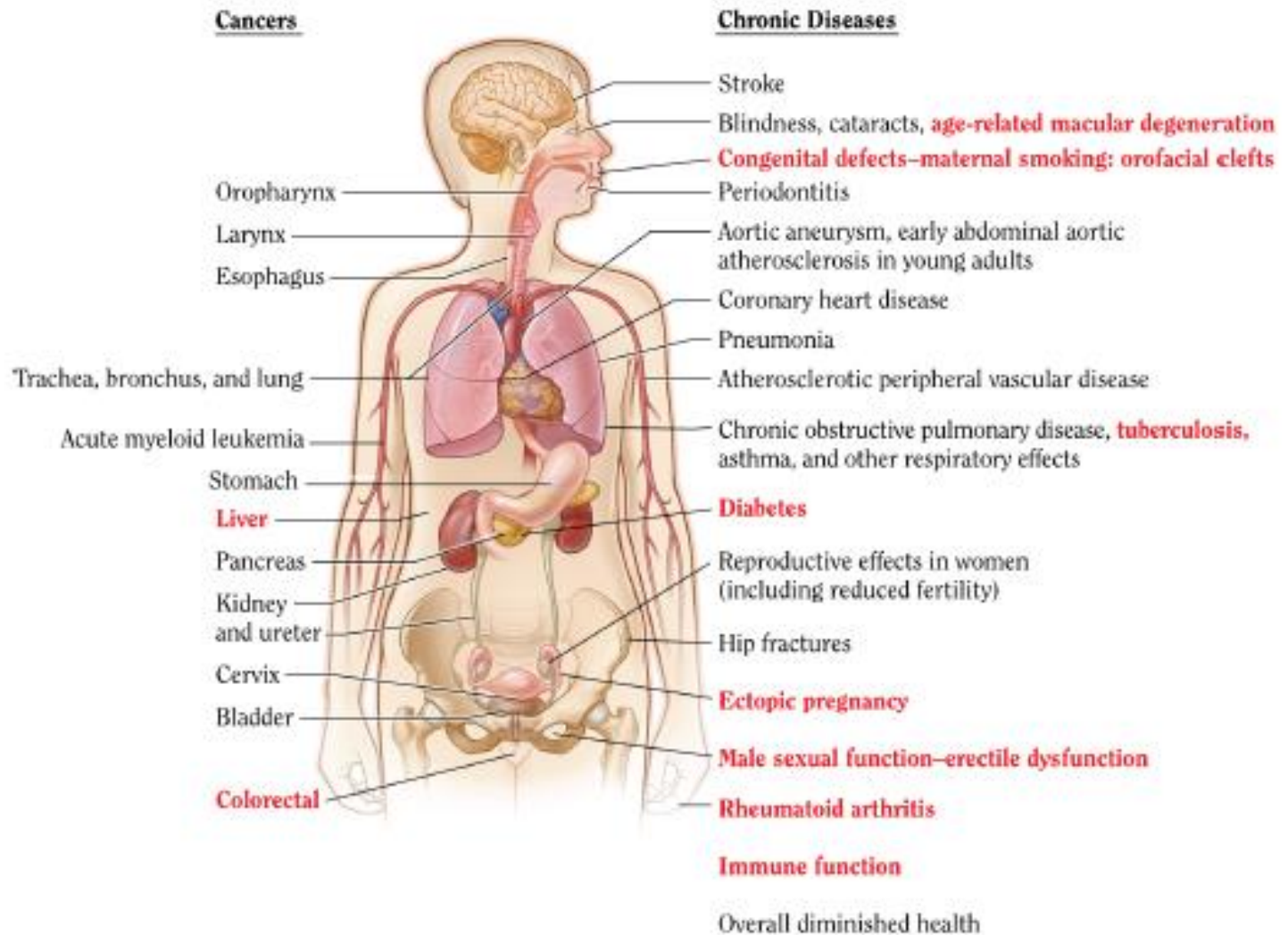
Particles

- Nicotine
- Nitrosamines
- Lead
- Cadmium
- Polonium-210

Nicotine does NOT cause the ill health effects of tobacco.



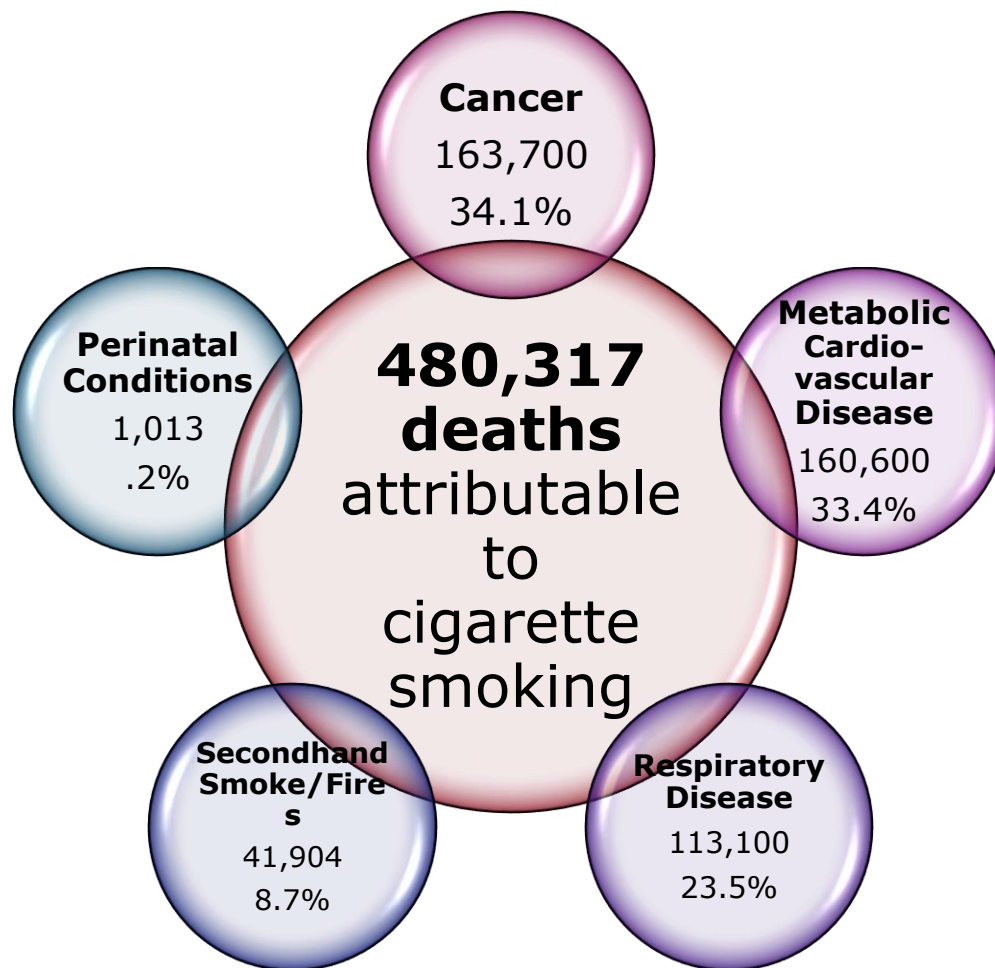
Figure 1A The health consequences causally linked to smoking



Source: USDHHS 2004, 2006, 2012.

Note: The condition in **red** is a new disease that has been causally linked to smoking in this report.

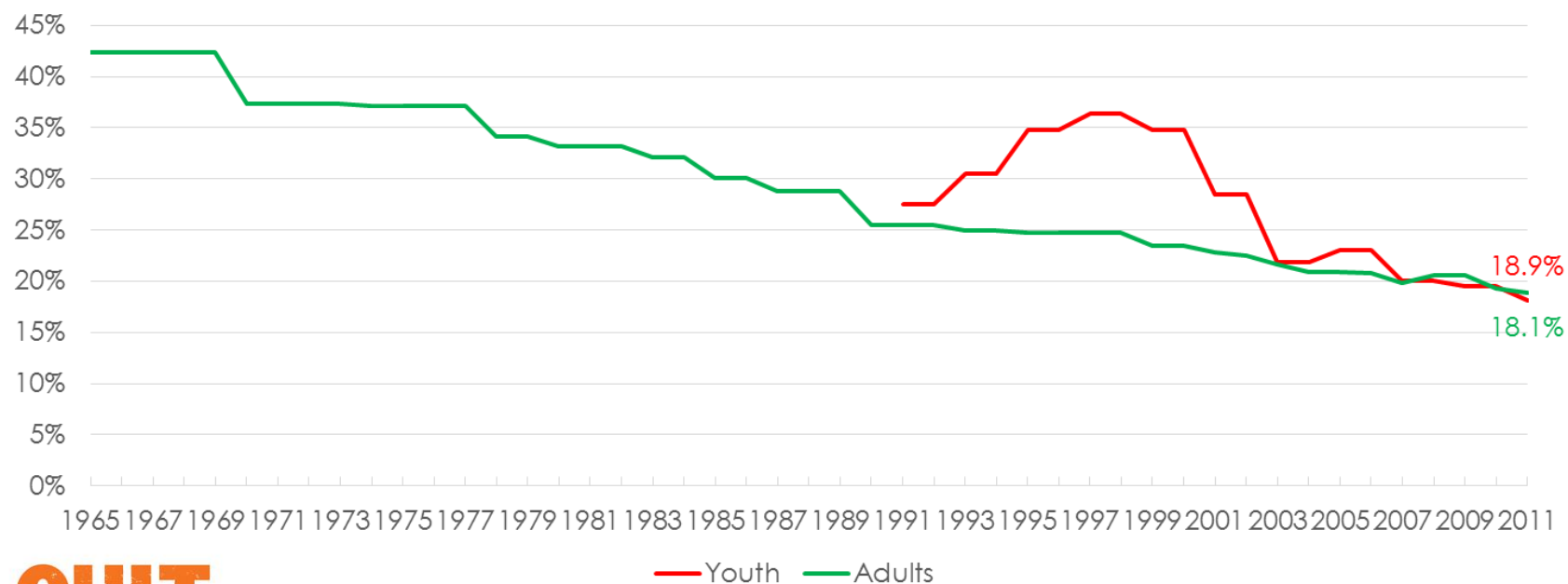
Annual Deaths Attributable to Cigarette Smoking—United States, 2000–2004



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Source: 2014 Surgeon General's Report

Trends in Current Cigarette Smoking Among Youth and Adults, United States, 1965–2011^{1,2}

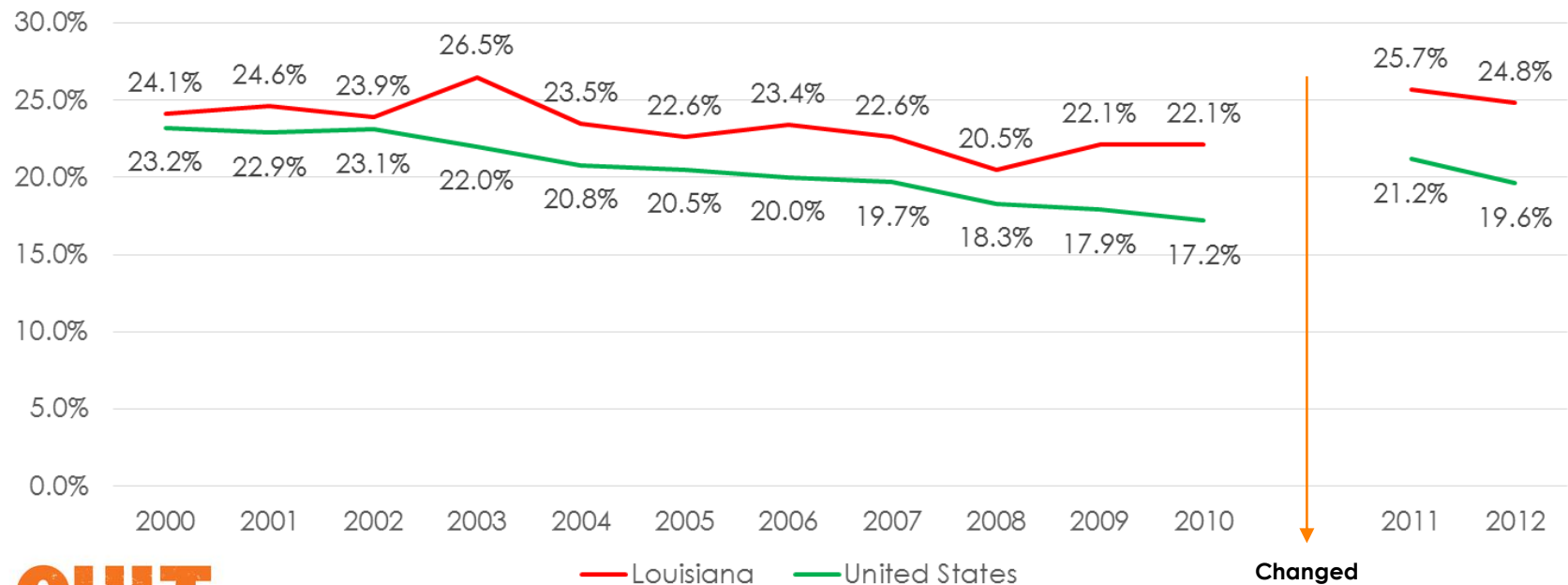


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¹Percentage of high school students who smoked cigarettes on 1 or more of the 30 days preceding the survey. Data first collected in 1991. (Youth Risk Behavior Survey, 1991–2011).

²Percentage of adults who are current cigarette smokers (National Health Interview Survey, 1965–2011).

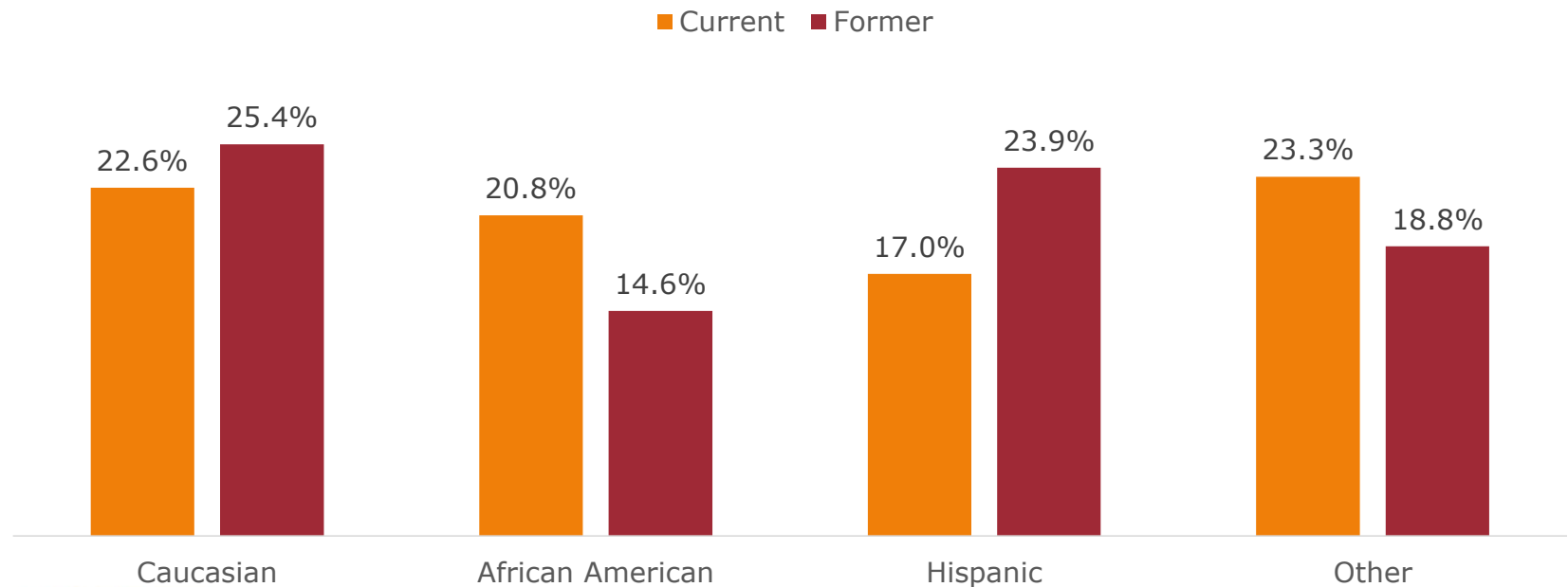
Percent of Adult Current Smokers, Louisiana vs. United States¹



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¹Behavioral Risk Factor Surveillance System

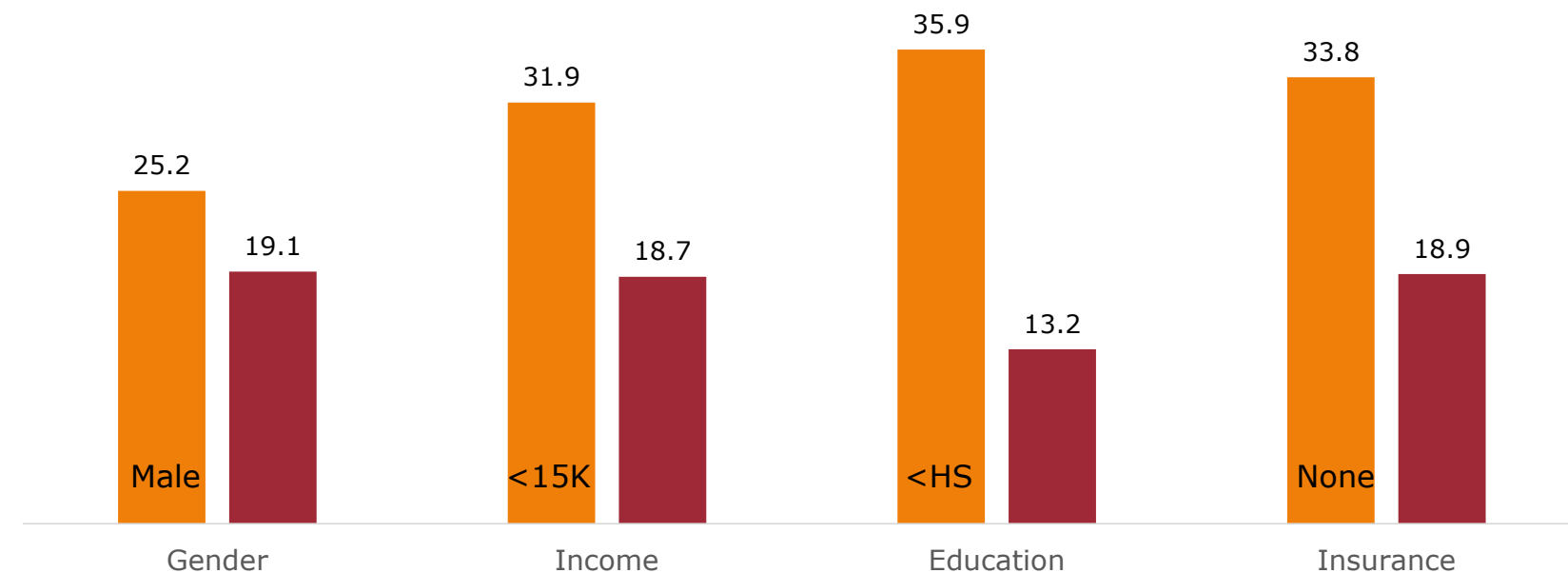
Race As A Factor on Current and Former Smoking Behavior in Louisiana¹



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¹2010 Behavioral Risk Factor Surveillance System Report, LA Department of Health and Hospitals, 2012

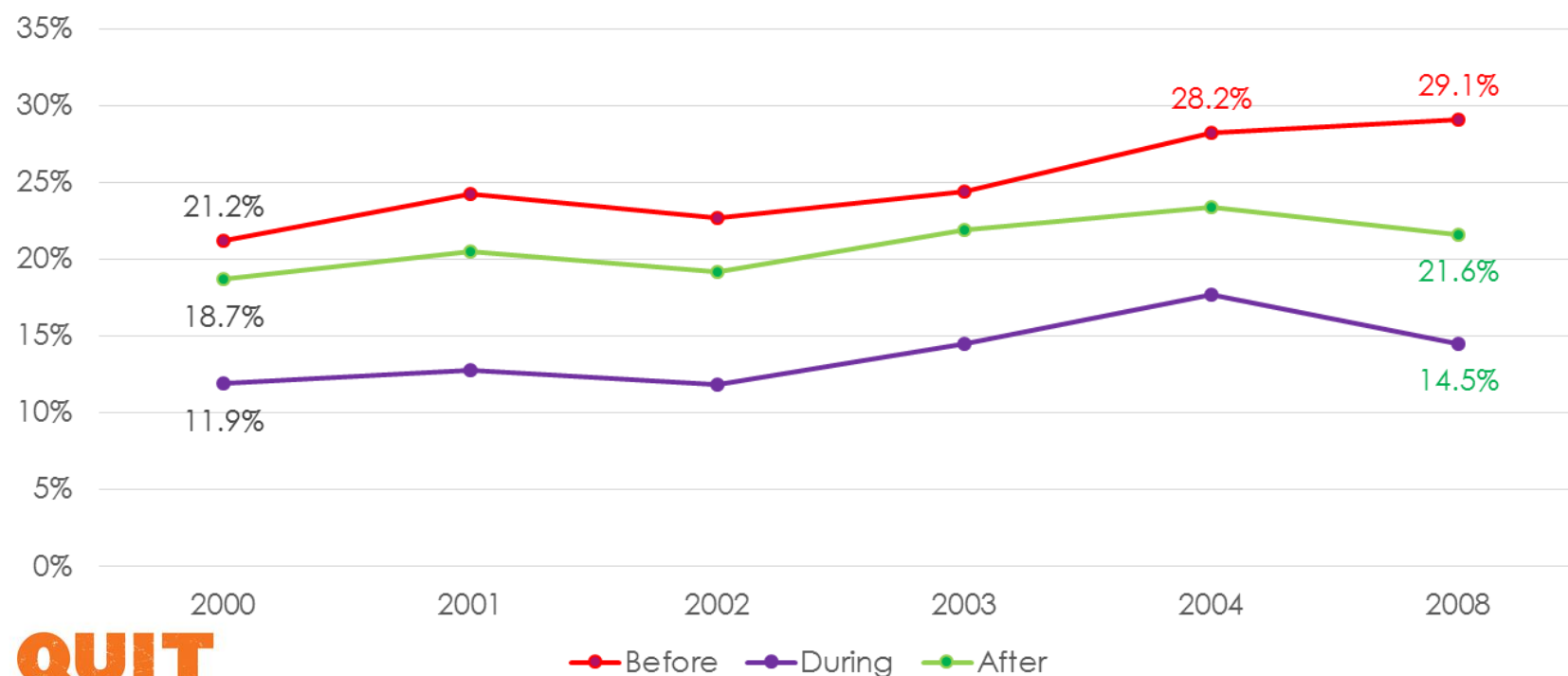
Other Factors Influencing Current Smoking Behavior in Louisiana¹



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¹2010 Behavioral Risk Factor Surveillance System Report, LA Department of Health and Hospitals, 2012

LA Smoking Prevalence for Women of Child-bearing Age, Pregnant and Postpartum^{1,2}



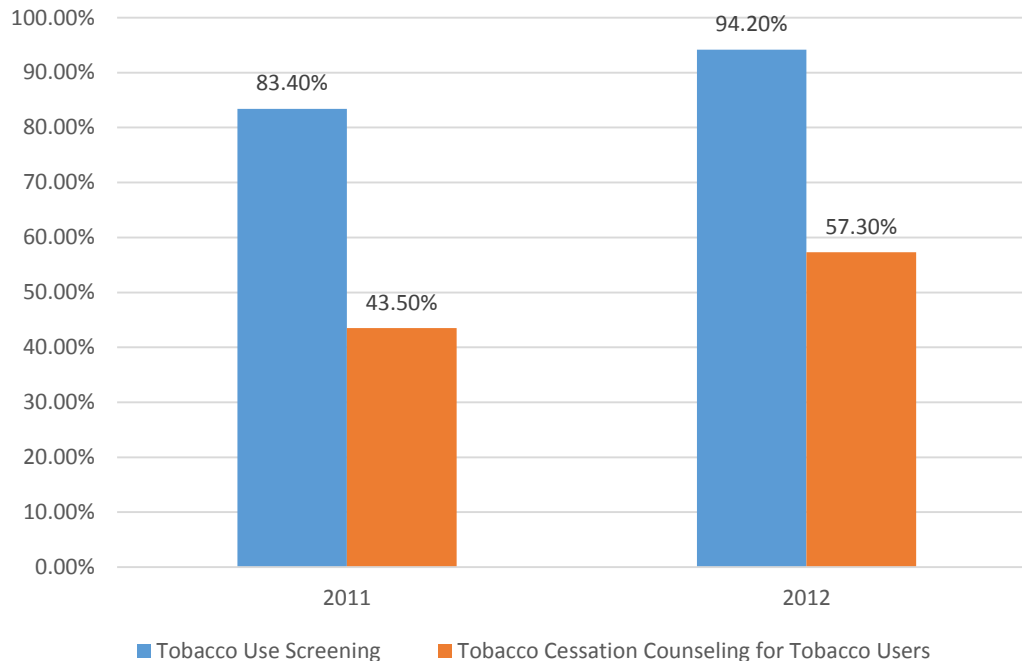
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¹ CDC. PRAMS and smoking. <http://www.cdc.gov/prams/tobaccoandprams.htm>. Accessed: March 5, 2014.

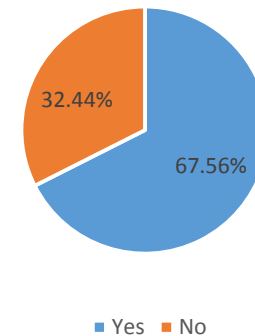
² Al-Qurayshi ZH and Kieltyka L. Maternal perinatal smoking behavior and infant outcomes Louisiana, 2008-2009. LA Morbidity Report:24(5):4-5.

Why is this so important?

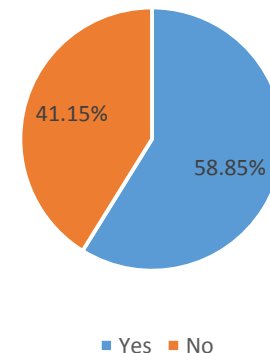
Clinical UDS Measures



2013 ATS Tobacco Use Screening



2013 ATS Tobacco Cessation Counseling and Referrals



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Magnitude of the Problem in Louisiana¹

- 13.8 million packs of cigarettes bought or smoked by kids each year
- US Ranking for Adult Smoking Rate --- 46th
- 6,500 adults die each year in Louisiana from their own smoking



Magnitude of the Problem in Louisiana¹

- Tobacco use costs Louisiana \$1.47 billion in healthcare costs, \$663 million of which are absorbed by the Medicaid program (SAMMEC, 2007).
- 30% of all cancers in the state are directly attributable to tobacco use (CDC, 2005)



The Bad News

- PUBLIC HEALTH versus “BIG TOBACCO”

The biggest opponent to tobacco control efforts is the tobacco industry itself.

In the U.S., for every \$1 spent on tobacco prevention, the tobacco industry spends \$28 to market its products.¹

\$284.8 million in advertising each year in Louisiana.¹



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¹Campaign for Tobacco Free Kids, 2012

The Good News

- More than 60% of adult smokers in Louisiana attempted to quit at least one day in the past¹
- Smokers are more likely to quit if a health professional intervenes²
- If 90% of smokers were advised to quit and offered medication or other assistance, 42 thousand additional lives would be saved each year³



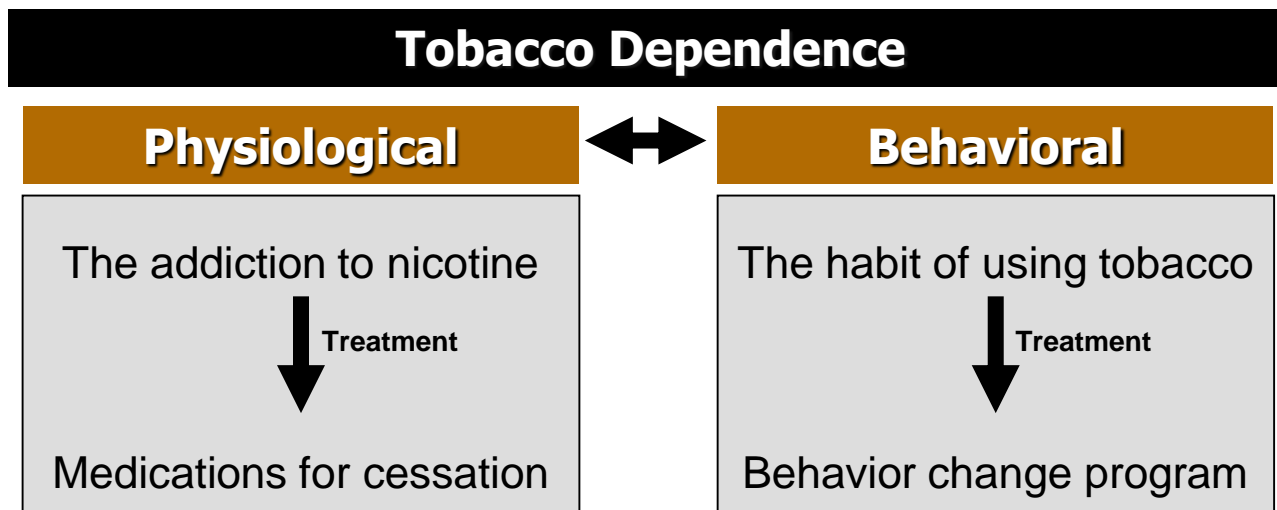
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¹ 2010 Behavioral Risk Factor Surveillance System Report, LA Department of Health and Hospitals, 2012

² Fiore et. al., Treating Tobacco Use and dependence Clinical Practice Guideline, 2008

³ Partnership for Prevention. Preventative Care: A National ³Profile on Use, Disparities, and Health Benefits. Washington, D.C.: Partnership for Prevention. August 2007

TOBACCO DEPENDENCE: A 2-PART PROBLEM



Treatment should address the physiological **and** the behavioral aspects of dependence.





Tobacco Control Initiative (TCI)

Dr. Sarah Moody-Thomas
Program Director

TCI - A Systems Approach

- The TCI is a systems approach to standardized identification and treatment of tobacco users within the LSU Healthcare Network
- TCI seeks to create, system-wide, an environment that supports implementation of the PHS guidelines for the treatment of tobacco use and dependence



TCI Goal

- To reduce the prevalence of tobacco use within the LSU patient population by:
 - Identifying all tobacco users
 - Identifying those evidence-based interventions that are both appropriate for and acceptable to patients
 - Continuously evaluating to inform program development and improve adherence and outcomes



TCI Funding

- The Louisiana state legislature enacted an excise tax on cigarettes in 2002
- A portion of the proceeds were dedicated to develop a comprehensive control program including the provision of cessation services to patients of the state's public hospital system



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*Centers for Disease Control (CDC). (2001) Behavioral risk factor surveillance system survey data. U.S. Department of Health and Human Services, Atlanta

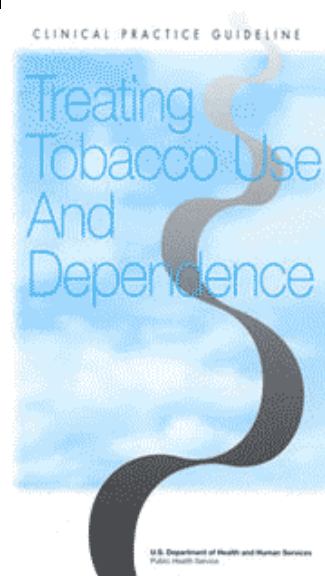
TCI Cessation Services Offered

- Provider Training and Feedback
- Individual and Group Behavioral Counseling
 - Including bedside counseling for in-patients
- Facilitated access to the Louisiana Quit-Line
- Funding for Cessation Medication
- Patient Education Material



TCI Approach

- TCI uses the US Public Health Service evidence-based Clinical Practice Guideline (CPG) for Treating Tobacco Use and Dependence in healthcare delivery systems.
 - System Interventions
 - Clinical Interventions
 - Patient Interventions



System Intervention Strategies

- A tobacco-user identification system in every clinic
- Education, resources, and feedback to promote intervention
- Dedicate staff to provide cessation treatments
- Hospital/system policies to support services
- Paid or covered cessation treatments



Practice, Patienta

Male, 31 y.o., 01/05/1980

PCP: FAMILY MEDICINE, PHYSICIAN

Language: English

Needs Interpreter?: No

Allergies
No Known AllergiesPrimary Ins.: AETNA
MRN: 1000000352
CSN: 100000005222
MyChart: Inactive

8/1/2011 visit with Jeffrey

SnapShot

Chart Review

Flowsheets

Results Review

Synopsis

Medications

Immunizations

Letters

Order Entry

MAR

Visit Navigator

Enter/Edit Results

Documentation Flo...

Orders for Admission

Order Review

Surgical Orders

More Activities

PHYSICIAN F.

Images References

Charting

Chief Complaint

Vital Signs

Care Everywhere

Allergies

Screening/Education

Verify Rx Benefits

Medications

Reconcile Dispens...

History

Progress Notes

Problem List

Goals

Orders

BestPractice

SmartSets

Visit Diagnoses

Meds & Orders

Discharge

Pt. Instructions

LOS & Follow-up

Charge Capture

Comm Mgt

Close Encounter

Category Select

Search:

△ Title

Current Everyday Smoker

Current Some Day Smoker

Former Smoker

Never Assessed

Never Smoker

Passive Smoker

Smoker, Current Status Unknown

Unknown If Ever Smoked

8 categories loaded.

Accept

Cancel

Tobacco Use

Former Smoker

Years

0.5 1 2 3 4 5 10 15 0.0

Smokeless Tobacco

Never Used

Ready to Quit

Yes No

Comment

Packs/day

0.25 0.5 1 1.5 2 3 0.00

Quit Date

Quit Date

Counseling Given

Yes No

Tobacco Cessation Intervention

✓ Mark as Reviewed 6/30/2011

When did the patient last use tobacco?

How soon is the patient willing to quit?

Were additional forms of treatment offered and accepted by the patient?

✓ Mark as Reviewed

Last Reviewed by Nurse Infusion, RN on 7/25/2011 at 9:13 AM

Restore

Close F9

Previous F7

Next F8

Progress Notes

Create Note in NoteWriter Create Note Go to Notes Refresh

click to open

PHYSICIAN F.

Results Hospital Chart Completion Patient Calls Hospital ADT My Incomplete Notes My Open Charts My Open Encounters Verbal Order Cosign

System Intervention Strategies

- A tobacco-user identification system in every clinic
- Education, resources, and feedback to promote intervention
- Dedicate staff to provide cessation treatments
- Hospital/system policies to support services
- Paid or covered cessation treatments

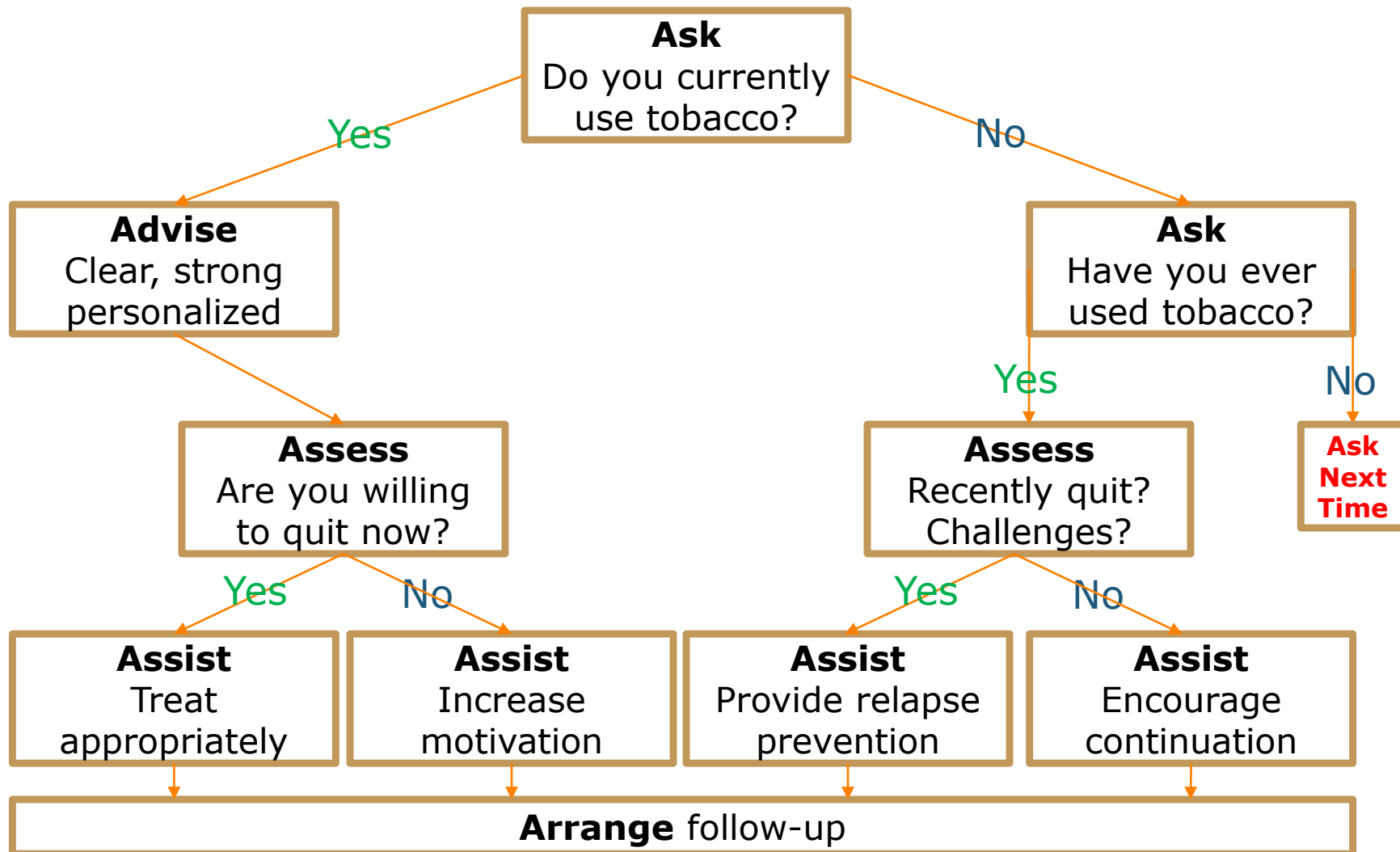


Clinic Intervention Strategies

- The “**5 A’s**” Model
 - **Ask** all patient about tobacco use
 - **Advise** all identified smokers to quit
 - **Assess** all smokers willingness to quit
 - **Assist** all ready to quit smokers make a quit attempt
 - **Arrange** follow-up contact



The "5 A's" Model for Treating Tobacco Use and Dependence - 2008



Reasons Cited for Not Helping Patients Quit

1. Too busy
2. Lack of expertise
3. No financial incentive
4. Most smokers can't/won't quit
5. Stigmatizing smokers
6. Respect for privacy
7. Negative message might scare patients away
8. I smoke myself

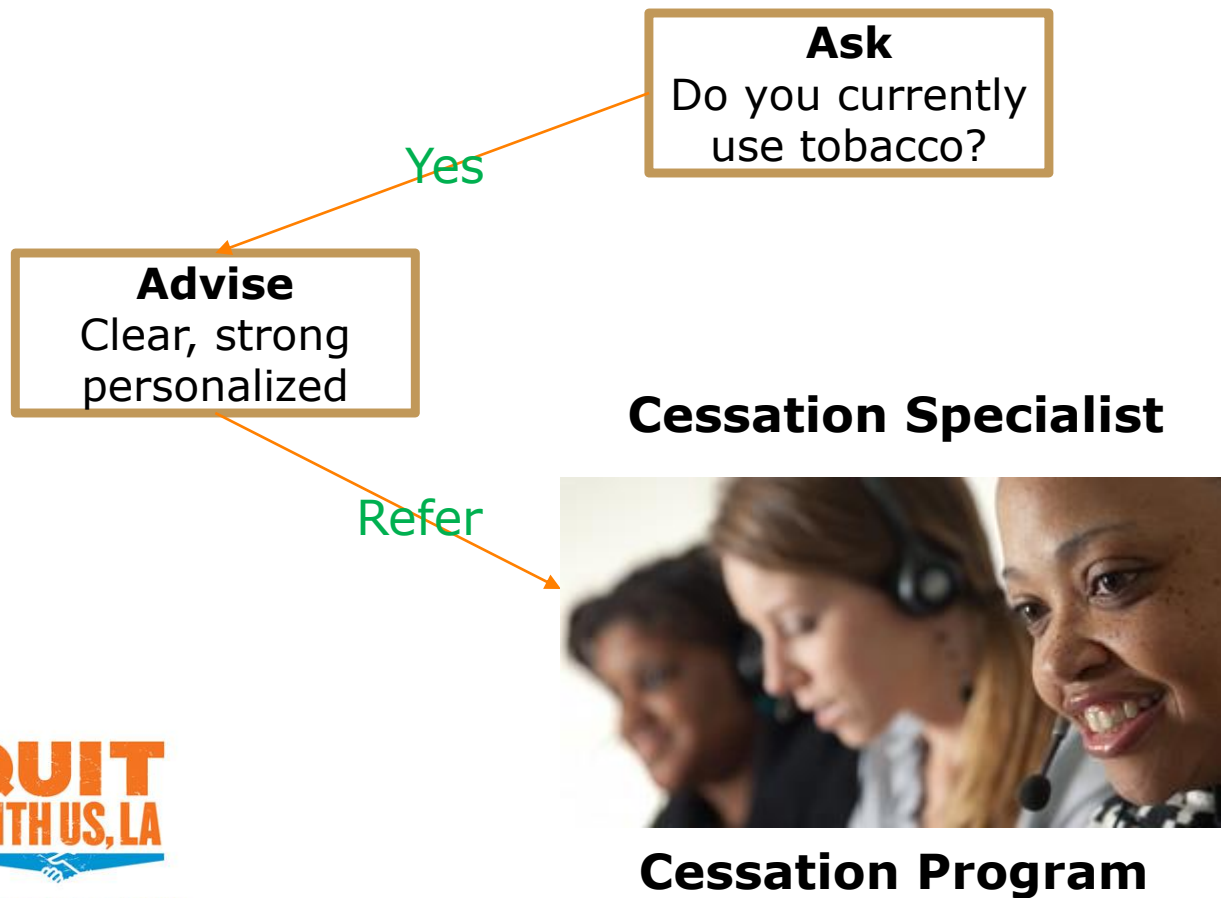


Clinic Intervention Strategies

- The “5 A’s” Model
 - Ask, Advise, Assess, Assist, Arrange
- The “2 A’s and an R” Model
 - Ask
 - Advise
 - Refer



The “2 A's and an R” Model for Treating Tobacco Use and Dependence



Clinic Intervention Strategies

- The “5 A’s” Model
 - Ask, Advise, Assess, Assist, Arrange
- The “2 A’s and an R” Model
 - Ask, Advise, and Refer
- The “2 A’s” Model
 - Ask
 - Act



American Academy of Family Physicians' Cessation Resources



ASK AND ACT A TOBACCO CESSATION PROGRAM

<http://www.aafp.org/patient-care/public-health/tobacco-cessation/ask-act.html>



Source: Jacobs T, Lavender N. AAFP Office Champions Leading Tobacco Cessation in FQHCs. FQHC Tobacco Conference and Behavioral Health Presentation, 2014.



Interactive Voice Response (IVR)

What is IVR?

- IVR is a technology that uses the telephone system to automate delivery of prompts and messages for someone to respond to using their voice or telephone keypad.



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Incoming
Call

Press #1
for Yes,
#2 for No!

Outgoing
Call

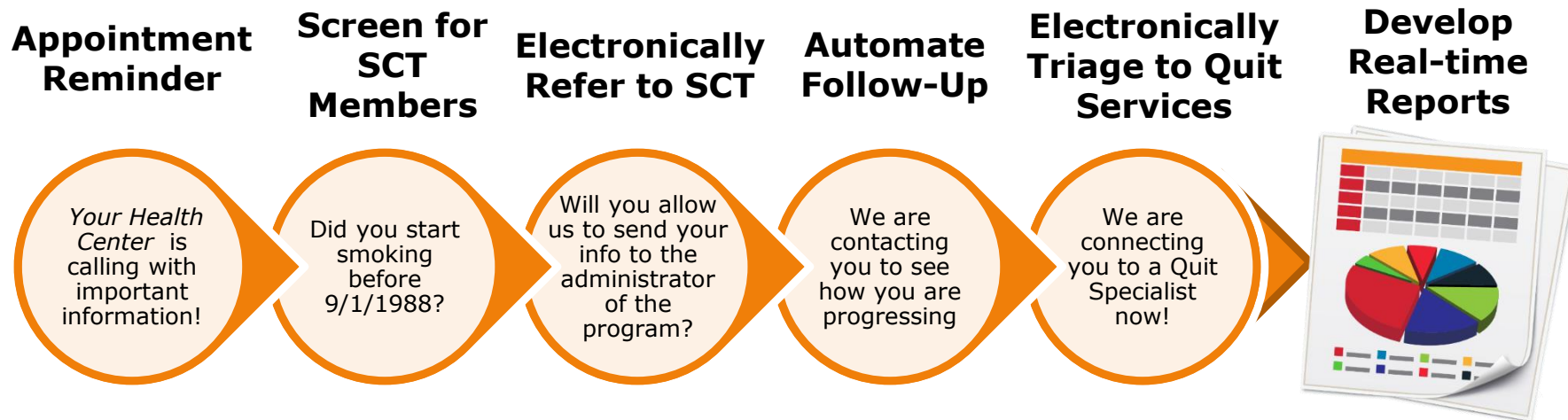


Privacy: Limited Disclosure

- HIPAA compliant
- Hosted in secure data centers
- Capable of running multiple projects at multiple sites
- Interfaces with any health setting EMR
- All data exchanges are encrypted
- Right Party Verification
- Hierarchical disclosure:
 - Network Manager > Site Manager > Unit Manager > Provider



How Does IVR Work for TCI?



TelASK TCI IVR System Projects

Appointment Reminder

- All patients with primary care appointments
- Daily import of EMR data into TelASK system
- Excludes some patients (e.g. prisoner) and clinics (e.g. infectious disease)

SCT Screening & Referral

- System informs the availability of free services to help smokers quit
- Patient indicates interest in hearing more information
- Allows us to share their information with administrator of program

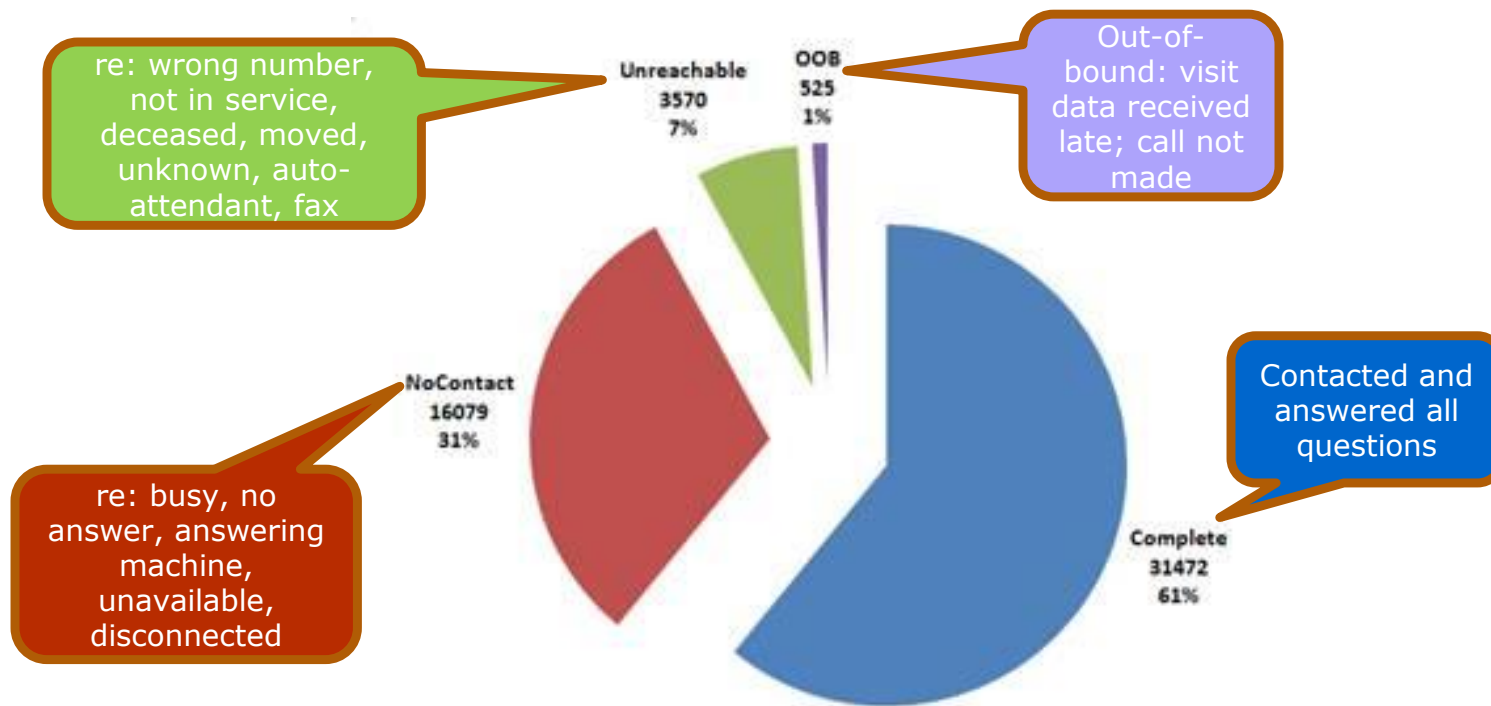
Quit Manager Protocol

- Ready to Quit¹ – current smoker (everyday/some days); ready in 30 days
- Not Ready to Quit² – current smoker; not ready in 30 days
- Recently Quit Low Efficacy¹ – former smoker; smoked in past 30 days
- Recently Quit High Efficacy² – former smoker; smoked in past 12 months

¹ Uses a 3, 14, 30, 60, 90, 120, 150, 180 day follow-up schedule

² Uses a 30, 90, 180 day follow-up schedule

Clinic Appointment Reminder Pilot Data



Reminder Calls, July 1, 2013 - June 6, 2014

SCT Screening and Referral Pilot Data (7/13 – Present)

- 3,819 current smokers received appoint reminder calls
- 2,292 wanted to know more about free services to help them quit
- 576 were eligible for SCT enrollment
 - $576 / 2292 = 25\%$ eligibility rate using only current smokers who answered eligibility question
- 519 were referred by IVR to SCT



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* after employing exclusion criteria and removing duplicate MRNs

Quit Manager Pilot Data (1/14 – Present)

- Call Outcomes
 - 631 (17%) current smokers enrolled in quit manager
 - 454 ready to quit
 - 139 (22%) completed at least one follow-up call (3, 14, or 30 day call)
 - 32 electronically (warm) transferred to quit-line
 - 52 electronically referred to quit-line
 - 112 referred to TCI group counselor



FQHC IVR Project

- Met with Louisiana Primary Care Association leadership
 - Recommended a pilot project
- Received approval to conduct pilot at Daughters of Charity
- Intent is to expand IVR to other sites in collaboration with TFL



Patient Interventions

- Behavioral Counseling – On-site
 - One-on-One
 - Group Class
 - Telephone
- Cessation Medication
 - Chantix (Varenicline)
 - Zyban (Bupropion SR)
 - Nicotine Replacement Therapy (Patch, Gum, Spray, Inhaler, Lozenge)
- Educational Material
 - Self-help



Louisiana Statewide Cessation Resources



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Learning Objectives

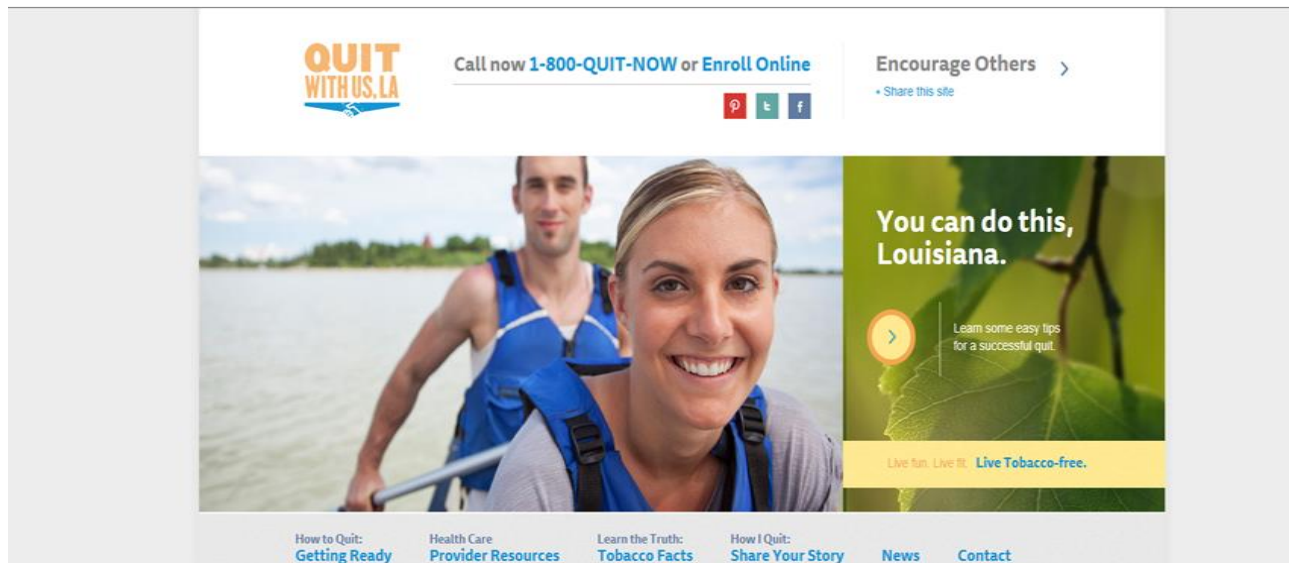
All Attendees will be able to:

- Utilize all of the state-wide cessation resources and toolkits that are available
- Identify at least three resources that clinicians can utilize to aid patients/clients in quitting smoking
- Implement/enhance existing tobacco cessation services by leveraging available resources
 - Resources: Quitwithusla.org, Fax-to-Quit Program, HEAL Toolkit, Louisiana State Quitline, Web Enroll Program and the Smoking Cessation Trust



"Quit with Us LA" Website

- Quitwithusla.org



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How to Quit: Getting Ready

- **Access to Cessation links:**
 - Reasons to Quit
 - How to Quit
 - Links to Quitline and Web enroll page
 - Benefits of Quitting
- **Follow-up material:**
 - Support Lines
 - How to Stay Quit
 - Success Stories



Healthcare Providers

[Getting Ready](#)[Provider Resources](#)[Tobacco Facts](#)[Share Your Story](#)[News](#)[Contact](#)[Home](#) / [Health Care Provider Resources](#)[+ Share this page with others](#)

[Well-Ahead Louisiana
Provider Downloads](#)
[Fax-To-Quit Louisiana
Louisiana Tobacco Quitline
Smoking Cessation Trust](#)
[The 5 A's: Steps to
Tobacco Intervention](#)
[Tobacco-Free Health Care Facilities](#)
[HEAL Toolkit](#)
[Medicaid & Medicare](#)
[Louisiana Tobacco
Cessation Consortium](#)
[LSU Tobacco Control Initiative](#)

Helpful links

[REASONS TO QUIT](#)[GET A QUIT PLAN](#)[QUITLINE SUPPORT](#)[MEDICATIONS](#)[STAYING QUIT](#)[RESOURCES](#)[SHARE YOUR STORY](#)

Health Care Provider Resources

As a health care professional, you understand the negative effects your patients live with as a result of tobacco addiction. But tobacco cessation is one area where we can make a positive impact on health outcomes in Louisiana. Together with counseling or medication, quit rates can be significantly greater than quitting without help.¹

We encourage all health care providers to enroll in the [Fax-To-Quit Louisiana](#) program and help your patients by utilizing the [U.S. Public Health Service Clinical Practice Guidelines for Treating Tobacco Use and Dependence](#). Your role as a clinician in the quitting process is critical. You are the link between the patient and the help they need to quit tobacco. Often a tobacco user will make several attempts before succeeding in quitting. So if the patient does not follow through the first time or tries and relapses, do not see this as negative. Tobacco users can learn from each quit attempt, and eventually, with help and reinforcement, the next attempt may be successful.

Thank you for playing this important role in helping to make Louisiana a healthier place.

References:

¹ Tobacco Use and Dependence Guideline Panel. Treating Tobacco Use and Dependence: 2008 Update. Rockville (MD): US Department of Health and Human Services; 2008 May. Available from: <http://www.ncbi.nlm.nih.gov/books/NBK63952/>

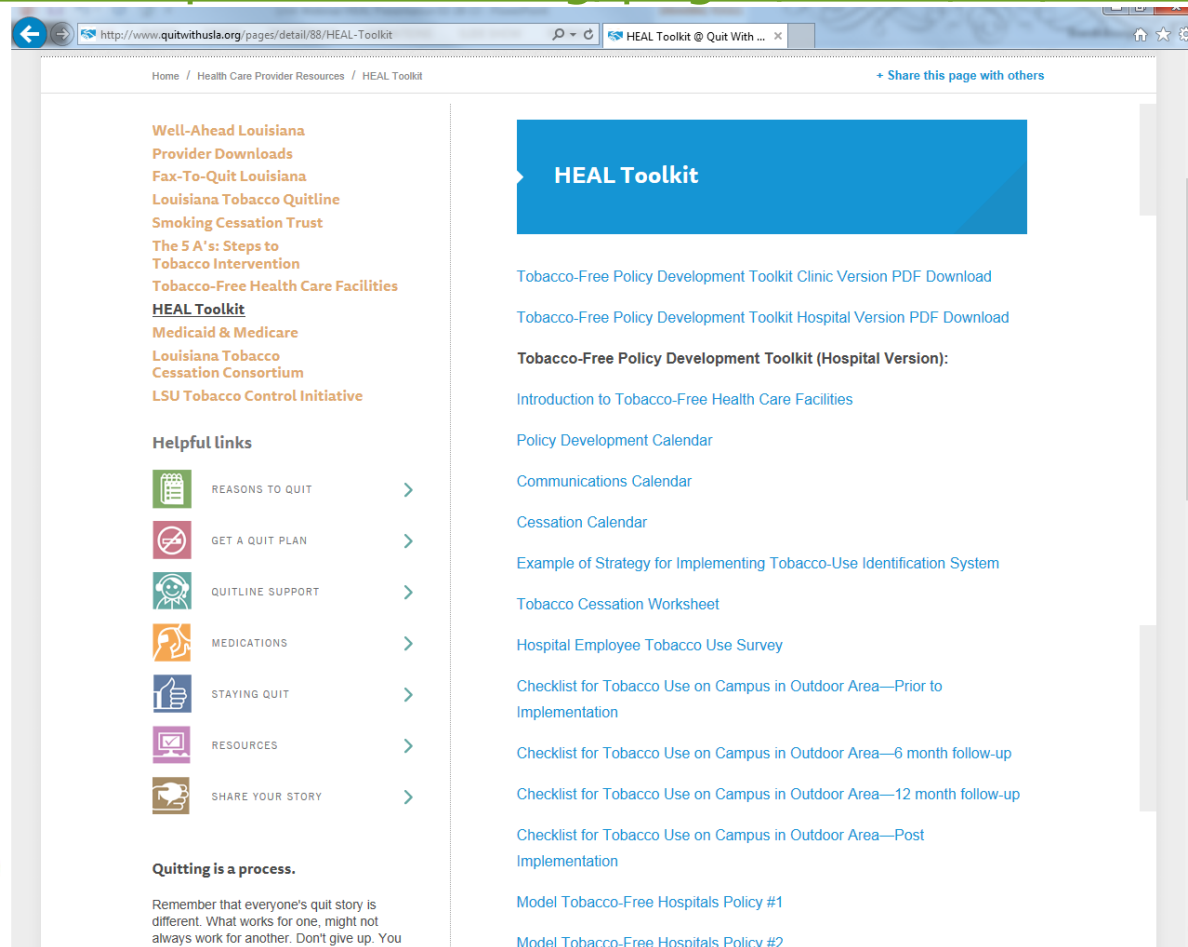


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Tools

- HEAL Toolkit

<http://www.quitwithusla.org/pages/detail/88/HEAL-Toolkit>



The screenshot shows a web browser displaying the HEAL Toolkit page. The browser's address bar shows the URL <http://www.quitwithusla.org/pages/detail/88/HEAL-Toolkit>. The page has a navigation bar with "Home / Health Care Provider Resources / HEAL Toolkit" and a "Share this page with others" link. On the left, a sidebar lists various resources: Well-Ahead Louisiana, Provider Downloads, Fax-To-Quit Louisiana, Louisiana Tobacco Quitline, Smoking Cessation Trust, The 5 A's: Steps to Tobacco Intervention, Tobacco-Free Health Care Facilities, HEAL Toolkit (highlighted), Medicaid & Medicare, Louisiana Tobacco Cessation Consortium, and LSU Tobacco Control Initiative. Below this is a "Helpful links" section with icons and text for: REASONS TO QUIT, GET A QUIT PLAN, QUITLINE SUPPORT, MEDICATIONS, STAYING QUIT, RESOURCES, and SHARE YOUR STORY. The main content area features a blue header for "HEAL Toolkit" followed by a list of links: Tobacco-Free Policy Development Toolkit Clinic Version PDF Download, Tobacco-Free Policy Development Toolkit Hospital Version PDF Download, Tobacco-Free Policy Development Toolkit (Hospital Version): Introduction to Tobacco-Free Health Care Facilities, Policy Development Calendar, Communications Calendar, Cessation Calendar, Example of Strategy for Implementing Tobacco-Use Identification System, Tobacco Cessation Worksheet, Hospital Employee Tobacco Use Survey, Checklist for Tobacco Use on Campus in Outdoor Area—Prior to Implementation, Checklist for Tobacco Use on Campus in Outdoor Area—6 month follow-up, Checklist for Tobacco Use on Campus in Outdoor Area—12 month follow-up, Checklist for Tobacco Use on Campus in Outdoor Area—Post Implementation, Model Tobacco-Free Hospitals Policy #1, and Model Tobacco-Free Hospitals Policy #2.

Home / Health Care Provider Resources / HEAL Toolkit [+ Share this page with others](#)

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Helpful links

- REASONS TO QUIT >
- GET A QUIT PLAN >
- QUITLINE SUPPORT >
- MEDICATIONS >
- STAYING QUIT >
- RESOURCES >
- SHARE YOUR STORY >

HEAL Toolkit

- Tobacco-Free Policy Development Toolkit Clinic Version PDF Download
- Tobacco-Free Policy Development Toolkit Hospital Version PDF Download
- Tobacco-Free Policy Development Toolkit (Hospital Version):**
 - Introduction to Tobacco-Free Health Care Facilities
 - Policy Development Calendar
 - Communications Calendar
 - Cessation Calendar
 - Example of Strategy for Implementing Tobacco-Use Identification System
 - Tobacco Cessation Worksheet
 - Hospital Employee Tobacco Use Survey
 - Checklist for Tobacco Use on Campus in Outdoor Area—Prior to Implementation
 - Checklist for Tobacco Use on Campus in Outdoor Area—6 month follow-up
 - Checklist for Tobacco Use on Campus in Outdoor Area—12 month follow-up
 - Checklist for Tobacco Use on Campus in Outdoor Area—Post Implementation
 - Model Tobacco-Free Hospitals Policy #1
 - Model Tobacco-Free Hospitals Policy #2



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What is Fax-To-Quit Louisiana?

- Links services of the Louisiana Tobacco QL directly to the potential quitter with the help of healthcare providers.
- The Louisiana Tobacco QL is for people ready to make a quit attempt within in the next 30 days.
- Only those who are ready to make a quit attempt, and agree to be contacted by the Quitline should be referred.
- The Louisiana Tobacco QL Fax Referral Program will provide the counseling component of the equation through the QL, while healthcare providers, provide the intervention and pharmacotherapy.
- <http://www.quitwithusla.org/pages/detail/24/Fax-To-Quit-Louisiana#start-training>



Louisiana Tobacco Quitline
The 5 A's: Steps to
Tobacco Intervention
Medicaid & Medicare
Tobacco-Free Health Care Facilities
Louisiana Tobacco
Cessation Consortium
LSU Tobacco Control Initiative

Helpful links



REASONS TO QUIT



GET A QUIT PLAN



QUITLINE SUPPORT



MEDICATIONS



STAYING QUIT



RESOURCES



SHARE YOUR STORY



Quitting is a process.

Remember that everyone's quit story is

Fax-To-Quit Louisiana

Fax-To-Quit Louisiana helps health care providers provide an easy and seamless counseling component to patients who are ready to quit tobacco. To become a certified Fax-To-Quit provider, simply complete the training module. The presentation takes about 15 minutes and will be followed by a short quiz.

Download the two PDFs to be discussed in the training module here:

[Fax-To-Quit Referral Form Sample](#)

[Fax Back Form](#)

[Start the training session](#)

Certified Health Care Provider Tool Kit

For participating in the program, you will receive a Fax-To-Quit Certified Health Care Provider Tool Kit featuring:

- Fax-To-Quit Manual
- Fax-to-Quit Referral Form
- Office Guide
- Medicaid Brochure
- Quit Referral Cards

If you experience any technical difficulties, please contact Brendetta Age at

Brendetta.Age@la.gov.

www.quitwithusla.org

Louisiana State Quitline

- **Quit Coaches available 24/7**
- English and Spanish speaking staff, Interpretive services available for other languages
- TTY for deaf and hard of hearing



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Quitline Continued

- Quitline Participants will also receive:
 - Quit Kits in the mail
 - Information and access to local quit smoking Programs in their community
- Help in setting up a Quit date and plan.



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Quitline Overview

- Multi-Call Program (5-Calls)
 - Effective April 10, 2013
 - 10-Call program available to pregnant women
- Nicotine Replacement Therapy
 - Gum and Patches Available
 - 2-week dose pack per 12 months



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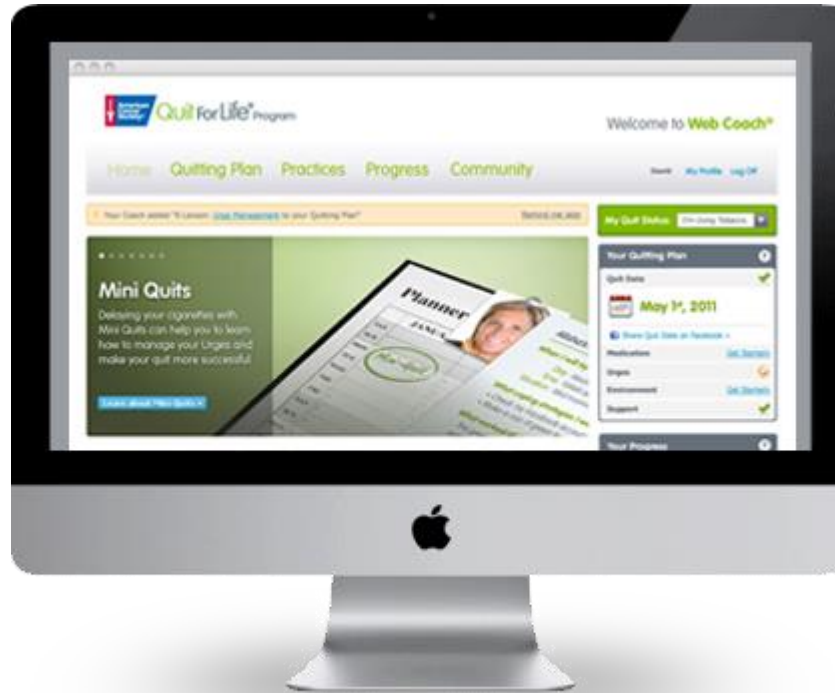


Multiple calls with
a Quit Coach



New... Enroll Online

- ☐ Chat with Quit Coach 24/7
- ☐ Set-up Quit plan
- ☐ Investigate benefits
- ☐ Find past testimonies



- ☐ Order NRT
- ☐ 2 Weeks of NRT available for ordering
- ☐ Take a survey to understand if you are ready to quit



QuitWithUsLa.Org 1.800.QUIT.NOW

Quitnow.net/Louisiana

Web Program

- **Web Only:** This program provides *exclusive access to Web Coach*, the online learning and support community. No phone calls will be received from a Quit Coach.
- **Web Enroll:** This program provides *phone-based support from a Quit Coach and access to Web Coach*.



Have Additional Questions?

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SMOKING CESSATION TRUST



Funded by a 2010 Court of Appeal decision, affirming the decision in the *Scott v. American Tobacco Co., et al* class action lawsuit, the Smoking Cessation Trust was created in 2011 to provide smoking cessation programs for Louisiana residents who began smoked cigarettes prior to September 1, 1988 (Scott Class).

**Scott Class
Members
Are 26 Years
Old+**



**To be covered by the
Smoking Cessation Trust
fund, members must:**

- **Complete an Application for participation in the Scott Class**
- **Have begun smoking cigarettes prior to September 1, 1988**
- **Reside in Louisiana**
- **Be approved by the Judge Presiding over the Scott Class**



Hi-lights of Smoking Cessation Trust Development

To-date

- **Completed design & implemented program Nov. 2011 to Sept. 2012**
- **First Member: April 2012**
- **Open for business: Oct. 1, 2012**
- **Serve + 17,109 Members in all Louisiana Parishes (as of 06/30/14)**
- **2014 Average +1,397 new applicants/month**



SCT Management Services, L3C (SCTMS) was created by the Smoking Cessation Trust to manage the daily activities necessary to execute the Trust's mission. In that regard, SCTMS has exclusive operational responsibility for the execution of all relationship and/or infrastructure needs required to meet the goals of the Trust.

SCTMS' Mission

- **Arrange for the highest level of smoking cessation services possible to the greatest number of Scott Class Members.**
- **Increase the number of ex-smokers (smokers who quit) in Louisiana.**
- **Make significant positive contributions to improving Louisiana's clinical smoking cessation services for smokers in Louisiana.**



The smoking cessation program defined by the Court is comprised of four evidence-based components:

- **Telephone quit-lines**
- **Health systems interventions (covers costs associated with major modifications to systems of care related specifically to cessation)**
- **Intensive cessation programs (programs offering combination of treatment regimens)**
- **Reimbursement for smoking cessation Nicotine Replacement Therapy (NRT) and related Medications**



**Our services are
provided by:**

- **Nurtur[®] provides quit-line coaching services to all Scott Class Approved Members.**
- **State Quit-line can be used too.**
- **US Script provides retail access to pharmaceuticals covered by the Program through their pharmacy network.**
- **Counseling provided by providers participating in Gilsbar 360^o PPO Network**
- **Clinic-based and group counseling provided by providers that are directly contracted with SCT Management Services (SCTMS).**



**Provider Programs
Contracted with SCTMS for:**

- **Clinic-based programs**
 - **Group counseling programs**
 - **Health systems interventions**
- **Baton Rouge General (2)**
 - **Cardiovascular Institute of the South (14)**
 - **Ochsner Health System (3)**
 - **Mary Bird Perkins Cancer Center (5)**
 - **Slidell Memorial Hospital (1)**
 - **West Jefferson Medical Center (1)**
 - **LSU Health Sciences Centers/Charity Hospitals (State-wide) (11)**
 - **Louisiana Heart Hospital (Lacombe)**
 - **Rapides Foundation (Alexandria)**



**Provider Programs in
Discussions with SCTMS
for:**

- **Clinic-based programs**
- **Group counseling programs**
- **Health systems interventions**
- **St. Francis Medical Center (Monroe)**
- **Our Lady of the Lake RMC (Baton Rouge)**



The smoking cessation program defined by the Court is to provide payment for smoking cessation services for 10 years.

Smoking Cessation Trust Program will cease payments for smoking cessation services in the year 2022.



www.SmokeFreeLA.org

<https://www.smokingcessationtrust.org/>

(504) 529-5665 (local)
(855) 259-6346 (toll free)

Questions



QuitWithUsLa.Org 1.800.QUIT.NOW