

Referral Sources

1-800-QUITNOW

Free one-on-one counseling services are available for all Kentuckians by calling 1-800-QUIT NOW. The quitline is a free, statewide, telephone-based tobacco cessation service. The quitline offers a one-on-one proactive counseling program for tobacco users who are ready to quit; provides support for people who want to stop smoking or using other tobacco products; offers information on tobacco dependence for health professionals, and families or friends of tobacco users; and provides information on community, regional and national cessation resources. Callers enrolled in the counseling program participate in five counseling sessions each specifically designed to address various aspects of tobacco cessation. Counseling protocols are designed using empirically based resources that include Treating Tobacco Use and Dependence: 2008 update (USDHHS, 2008). Proactive referrals from providers are effective to promote cessation using fax referrals. Fax referral forms can be found at <http://chfs.ky.gov/dph/info/dpqi/hp/tobacco.htm>



BecomeAnEx.org

The BecomeAnEX.org website assists smokers in changing the way they feel about the process of quitting, guiding them to valuable resources, such as Kentucky's Tobacco Quitline at 1-800 (QUIT-NOW) or the online community at www.BecomeAnEX.org. The website contains tools to help smokers create their own plan to quit smoking. It encourages smokers to approach quitting smoking by "re-learning life without cigarettes." EX helps smokers understand when and why they smoke each cigarette, so they can break down their quit attempt into manageable pieces. EX provides smokers with information that can help them prepare for a quit attempt by:



- "Re-learning" their thinking on the behavioral aspects of smoking and how different smoking triggers can be overcome with practice and preparation.
- "Re-learning" their knowledge of addiction and how medications can increase their chances of quitting success.
- "Re-learning" their ideas of how support from friends and family members can play a critical role in quitting.

Cooper/Clayton Method to Stop Smoking

Refer patients to their local health department for participation in the Cooper/Clayton Method to Stop Smoking (12-week behavioral modification group cessation). The Cooper/Clayton Method to stop smoking uses nicotine gum, the nicotine patch or the nicotine lozenge to minimize nicotine withdrawal. The program consists of one preparation week to determine smoking pattern followed by 12 weeks of treatment which includes learning skills that enable smokers to live without cigarettes.

Freedom From Smoking (American Lung Association)

The Freedom From Smoking® group clinic includes eight sessions and features a step-by-step plan for quitting smoking. Each session is designed to help smokers gain control over their behavior. The clinic format encourages participants to work on the process and problems of quitting both individually and as part of a group. For more information about available group sessions, contact (502) 363-2652 or 800-LUNG USA.



An online version of the program can be found at Freedom From Smoking Online. (<http://www.ffsonline.org>)

For more information about the content of this publication call the Kentucky Department for Medicaid Services Tobacco Cessation Program at (502) 564-9444. Visit the program online at chfs.ky.gov/dms.

Kentucky Medicaid Tobacco Cessation Benefit

A fact sheet and overview for physicians and other providers

Cabinet for Health and Family Services
Kentucky Department for Medicaid Services
Kentucky Tobacco Cessation and Prevention Program



Medicaid Tobacco Cessation Overview

On Sept. 1, 2010, tobacco cessation medication and counseling benefits were made available to Kentucky Medicaid members. Using evidence-based medication and counseling in quit attempts has been proven to increase successful quit attempts. Covered treatments are based on 2008 Clinical Practice Guidelines for Treating Tobacco Use and Dependence.

Additional details can be found at: <http://www.ahrq.gov/path/tobacco.htm>

Covered Medications

All FDA-approved medications are covered for two 90-day treatment regimens per year.

Some products are non-preferred and will require review via the prior authorization process. See enclosed chart.

Is a prescription needed for all medications, including those available over the counter?

Yes. All medications, including over-the-counter nicotine replacement products, do require a prescription from a Licensed Kentucky Medicaid Provider, such as physicians, nurse practitioners, and physician assistants.

Can more than one form of medication be prescribed?

Yes. Evidence-based combinations of nicotine replacement (e.g., patch plus gum or lozenge) and bupropion will be covered if needed. Varenicline is not for use in combination with nicotine replacement medications.

Is there a copayment for medications?

No.

Where can I find a quick reference/dosing guide for tobacco cessation medications?

See enclosed chart.

Tobacco Cessation Assessment

A tobacco cessation assessment is a minimum of at least 10-minutes or more (performed face-to-face) and must include: asking the patient about tobacco use; advising the patient to quit; assessing the patient's readiness to quit. (CPT Code 99407)

The assessment must include history of tobacco use, medical, and psychosocial history, review of coping skills and barriers to quitting, and a written referral to a cessation program (Tobacco Cessation Referral Form).

The provider is required to complete a Tobacco Cessation Referral Form. The form is signed by the provider and member. The member is stating his/her intent to quit using tobacco. The provider submits the Tobacco Cessation Referral Form to Medicaid by fax or mail. (Fax and mailing address on referral form.)

Just the Facts

- Smokers cite a physicians' advice to quit as an important motivator for attempting to stop smoking.
- Tobacco dependence treatments are both clinically effective and highly cost-effective relative to interventions for other clinical disorders.

Source: Treating Tobacco Use and Dependence Clinical Practice Guideline 2008 Update. U.S. Department of Health and Human Services.

Eligibility

Who is eligible for this benefit?

Kentucky Medicaid recipients who use tobacco products are eligible for covered treatment. Recipients that are dual-eligible (covered under Medicaid and Medicare) do not have access to the medications through Kentucky Medicaid's program.

Do all Kentucky Medicaid plans offer the same benefit?

All Medicaid recipients who are eligible can receive tobacco cessation benefits. Recipients enrolled in Passport should contact Passport Health Plan for the details of their tobacco cessation program.

Who can conduct the assessment? Who can bill Kentucky Medicaid for providing tobacco use assessment?

A physician who is currently enrolled and active as a Medicaid provider.

A physician assistant who is working under the supervision of a physician and is currently enrolled and active as a Medicaid provider.

An APRN (nurse practitioner) who is currently enrolled and active as a Medicaid provider.

Can tobacco cessation assessment be billed on the same day if a patient has an office visit, procedure, or other appointment?

Yes. If the assessment of the recipient's readiness to quit occurs during a regular office visit, the tobacco cessation counseling can be billed for separately.

Are telephone counseling or alternative medicine treatments, such as acupuncture or hypnotherapy, covered?

Alternative treatments such as acupuncture or hypnotherapy and provider based telephone counseling are not covered.

Healthcare providers can assist tobacco users with creating a quit plan.

Encourage the smoker to:

- Identify reasons for quitting and benefits of quitting.
- Set a quit date, ideally within 2 weeks.
- Remove tobacco products from their environment.
- Get support from family, friends, and coworkers.
- Anticipate challenges, particularly during the critical first few weeks, including nicotine withdrawal.

Give advice on successful quitting:

- Total abstinence is essential — not even a single puff.
- Drinking alcohol is strongly associated with relapse.
- Allowing others to smoke in the household hinders successful quitting.

Encourage use of medication:

- Recommend use of over-the-counter nicotine replacement therapy; or give prescription for varenicline, bupropion SR, nicotine inhaler, or nasal spray, unless contraindicated.

Provide resources for quitting. (See back page.)

Source: Treating Tobacco Use and Dependence Clinical Practice Guideline 2008 Update. U.S. Department of Health and Human Services.