



Tobacco Cessation Coverage and Quality Measurement

Niharika Khanna, MD, MBBS, DGO,

Professor of Family and Community Medicine,

Director Tobacco Control Resource Center University of Maryland, School of Medicine



Disclosures

I have no disclosures





UNIVERSITY of MARYLAND BALTIMORE

University of Maryland Tobacco team





Family and Community Medicine

Niharika Khanna, MD – PI Elena Klyushnenkova, PhD – Statistician Michael Dark, DrPH – Clinical Research Manager Carissa Kwan, MPH – Data Analyst Colleen Kernan, MPH – Senior Research Program Coordinator

Psychiatry

Melanie Bennett, PhD - Co-I

Pulmonary and Critical Care Medicine

Janaki Deepak, MD - Co-I

Julia Melamed, RN – Nurse/Certified Tobacco Treatment Specialist







UNIVERSITY of MARYLAND BALTIMORE

ACA statement about coverage

Federal Guidance

- Tobacco cessation as a preventive service.
 - 4 sessions of individual, group and phone counseling
 - 90 days of all FDA-approved smoking cessation medications
 - 2 quit attempts per year
 - No prior authorization for treatments
 - No cost-sharing





- **Comprehensive Tobacco Cessation Benefit**

Seven FDA-approved medications:

- NRT gum
- NRT patch
- NRT lozenge
- **NRT** inhaler
- Bupropion
- Varenicline

NRT nasal spray

Three forms of counseling:

- Individual
- Group
- Phone

- All states cover at least one medication
- All states cover at least one form of counseling
- Most states have barriers to access
- Nineteen states have comprehensive cessation coverage

Under Section 1905(a)(4)(D) of the Social Security Act (as amended by the Patient Protection and Affordable Care Act), all state Medicaid programs are required to provide a comprehensive tobacco cessation benefit as defined by the U.S. Public Health Service guideline to pregnant women **American** who are enrolled in Medicaid.



Maryland Medicaid Coverage

Cessation Treatments 2023 Q4

Fee For Service	
Individual Counseling	Yes
Group Counseling	No
Nicotine Patch	Yes
Nicotine Gum	Yes
Nicotine Lozenge	Yes
Nicotine Nasal Spray	Yes
Nicotine Inhaler	Yes- Off Market
Bupropion (Zyban)	Yes
Varenicline (Chantix)	Yes



Maryland Cessation

Barriers to Treatment 2023 Q4



Fee For Service	
Co-Payments	No
Counseling required for medications	No
Stepped Care Therapy	Yes
Limits on Duration	Yes
Annual Limits	Yes
Lifetime Limits	No
Prior Authorization	Yes



USPSTFOn CDC website



The USPSTF recommends that clinicians ask all adults about tobacco use and provide tobacco cessation interventions for those who use tobacco products. Coverage recommendations:

- 1. Screening for tobacco use; and,
- 2.For those who use tobacco products, at least two tobacco cessation attempts per year. For this purpose, covering a cessation attempt includes coverage for:
- •Four tobacco cessation counseling sessions of at least 10 minutes each (including telephone counseling, group counseling and individual counseling) without prior authorization; and
- •All Food and Drug Administration (FDA)-approved tobacco cessation medications (including both prescription and over-the-counter medications) for a 90-day treatment regimen when prescribed by a health care provider without prior authorization.





Commercial Insurance Coverage

Variable!

- Depends on the commercial insurance/Plan
- Type of insurance coverage/Employer provided
- How Billed
 - Medical provider
 - as part of psychotherapy (counselors/social workers)
- CDC Suggests: Insurance coverage for smoking cessation treatment that is comprehensive, barrier-free, and widely promoted increases the use of these treatment services and leads to higher rates of successful quitting



UNIVERSITY of MARYLAND BALTIMORE

Medicare Codes and Reimburssement

Code	Description	Medicare Payment	
		Facility	Non-Facility
99406.	Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes	\$12.94	\$13.93
99407.	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes	\$25.73	\$27.21
94240/50	Billing for expired CO measure	N/A	\$48.77 \$33.69





QUITLINE 1-800-Quit-Now

Coverage for Counseling and Nicotine Replacement Therapy in most states

Maryland Quitline (RVO Health) accepts 18y + and has Medicaid agreement +

Nicotine Patch

Nicotine Gum

Nicotine Lozenge

Maryland Quitline Accepts 13y+, Pregnant, tobacco, ENDS, Smokeless tobacco

Counseling

Website – Yes

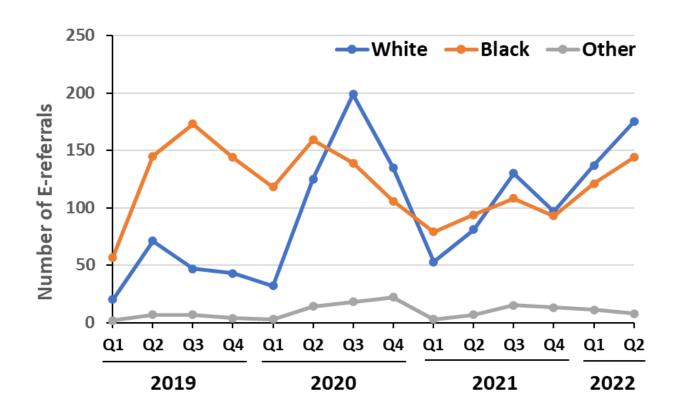
Chat Room - Yes

Working on texting capabilities





Maryland Quitline e-Referrals from UMMS 2019-2022







Quality Measurement and Documentation







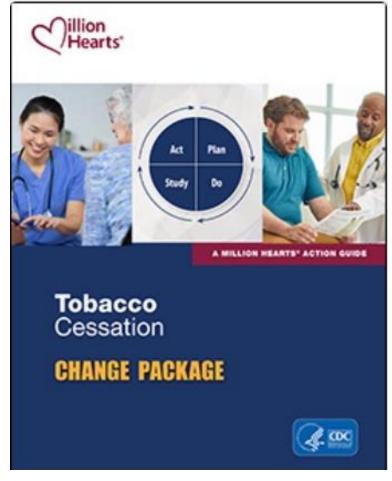
Why should you measure?

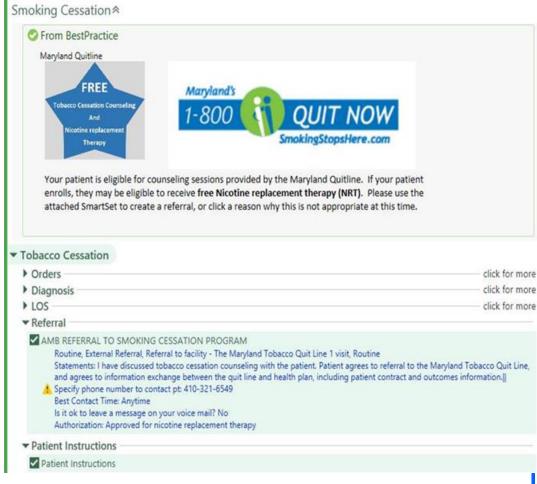
- The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of electronic cigarettes (ecigarettes) for tobacco cessation in adults, including pregnant persons.
- The USPSTF recommends that clinicians direct patients who use tobacco to other tobacco cessation interventions with proven effectiveness and established safety. See the Practice Considerations section for more information on recommended behavioral interventions and pharmacotherapy and for suggestions for practice regarding the I statements.



Tobacco Clinical Decision Support Tool

Maryland Epic CDS On page 21 (UM Medicine)



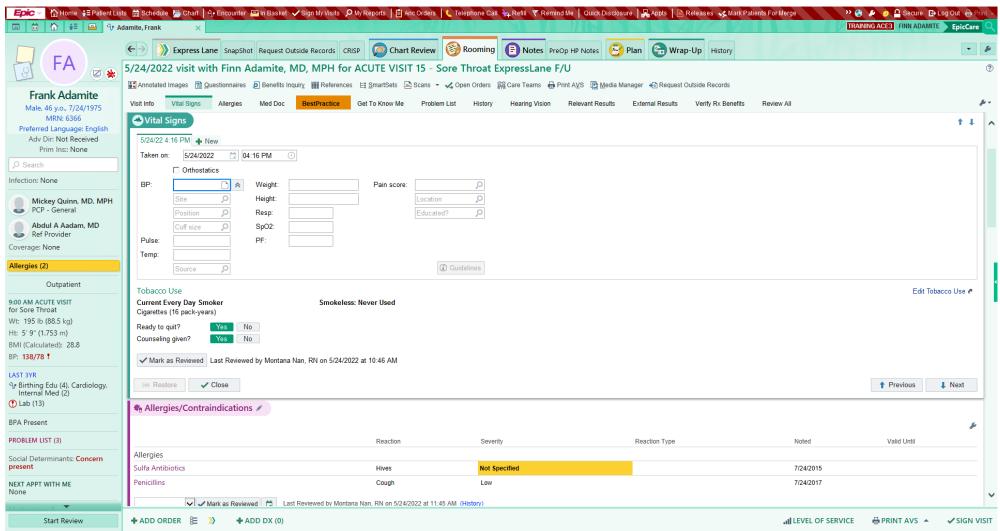


https://millionhearts.hhs.gov/tools-protocols/action-guides/tobacco-change-package/index.

American Lung Association

Epic Enhancements for data collection 5th Vital Sign

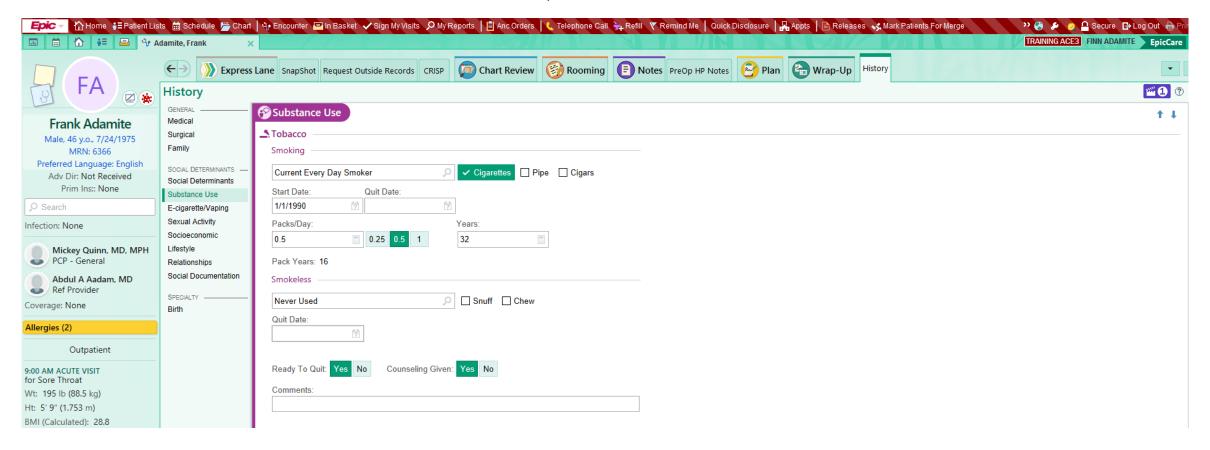








Tobacco Data Collection Tool and Referrals to Quitline and Tobacco Health Practice



	Code	Name	Type
Ç	REF139	AMB REFERRAL TO SMOKING CESSATION	Outpat Ref
	REF100	smoking (aka AMB REFERRAL TO MARYLAND QUITLINE)	Outpat Ref

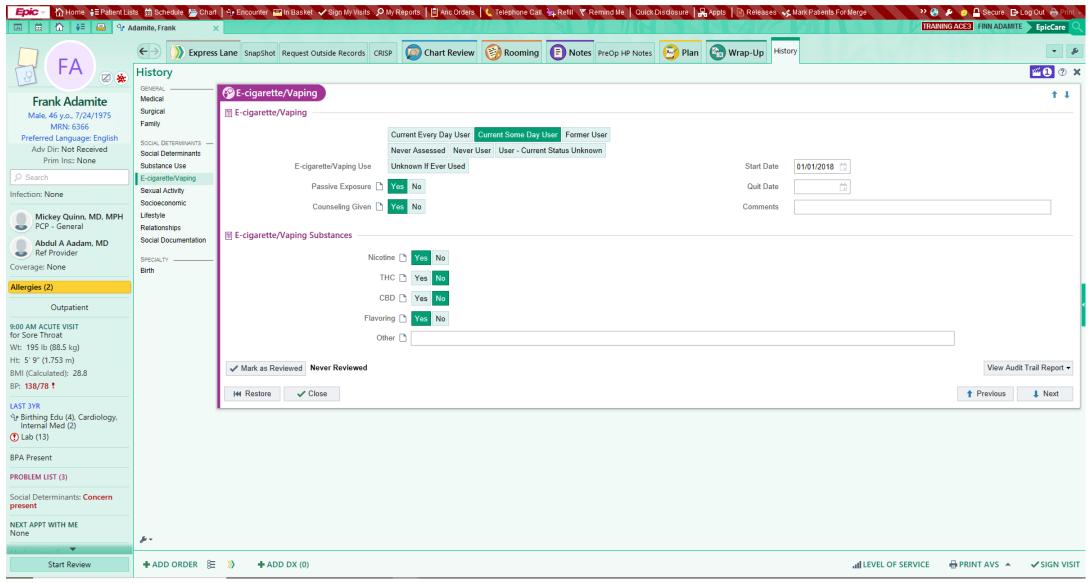


University of Maryland Baltimore

American

Association

E-Cigarettes and Vaping Assessment Tool (EVAT)



Training of Physicians, Practitioners, and Staff

Educational presentations on EVALI and EVAT at rounds, faculty meetings, and tobacco-related events took place from March 2021 to July 2023.

Seminars delivered by a physician educator and a nurse tobacco coach.

Educational materials were based on practice guidelines from the American Thoracic Society and a comprehensive literature review.

Pretraining:

- 63% reported not knowing much about e-cigarettes
- 43% reported that providing counseling about e-cigarette reduction would be moderately/extremely difficult
- 87% strongly agree that e-cigarette use is a public health concern

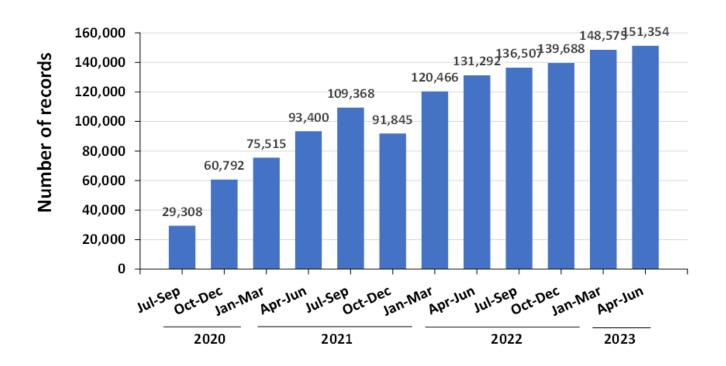
Provider Type	Trainings	Departments	Number Trained
Physician	21	19	562
Nursing/Other Clinical	28	17	271





Utilization of EVAT

Number of patients screened for e-cigarette/vaping use, n=436,096 Number of times the EVAT used, n=1,288,100







HEDIS measures

Federally Qualified Health Centers

Commercial insurers

HEDIS® includes more than 90 measures across 6 domains of

care:

- Effectiveness of Care.
- Access/Availability of Care.
- •Experience of Care.
- Utilization and Risk Adjusted Utilization.
- •Health Plan Descriptive Information.
- Measures Reported Using Electronic Clinical Data Systems



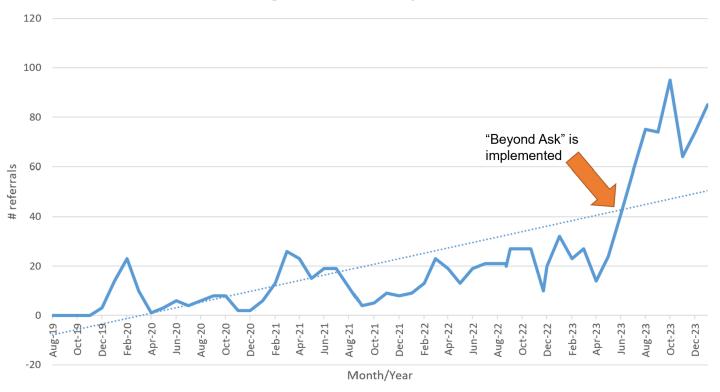




American College of Surgeons 2022 and 2023

Quality Improvement Project at University of Maryland

UMMC THP Referrals
August 2019 - January 2024









Preventive Care and Screening

Tobacco Use: Screening and Cessation Intervention

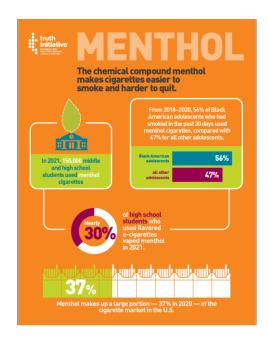
Performance Rates:

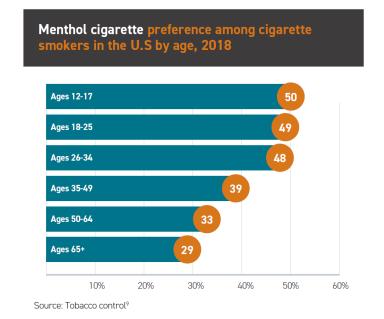
- 1. Percentage patients 18y+ screened for tobacco use within 24 months
- 2. Percentage 18y+ patients screened for tobacco use, identified as a tobacco user and offered tobacco cessation intervention





Questions? Comments?





Truth Initiative. (2024). Menthol. In Truth Initiative.

https://truthinitiative.org/sites/default/files/media/files/2024/01/Menthol%20Fact%20Sheet%20Updated%201.23.24.pdf

