

Deep Dive into the Wyoming Quit Tobacco Program

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Wyoming

QUIT

TOBACCO

PROGRAM



Wyoming
Department
of Health

Wyoming Quit Tobacco Program (WQTP) Components:

Trained Quit Coaches - Our quit coaches understand what it's like to quit and are committed to helping you get there.

Personalized quit plan - We'll work with you to make a customized quit plan that covers all the bases and pick a quit date that works for you.

24/7 Tools & Support - Connect with resources, information, and a community of others working to live tobacco-free just like you.

Free Nicotine Replacement Therapy & Prescription Medications - We can help you quit with free gum, lozenges, patches, and prescription medication.

Referral Options:

<https://wyo.quitlogix.org>

1. Web Referral
2. Fax Referral
3. E-Referral
4. Self Referral

Health Care Provider



How the Program Works



AAR Model



Provider FAQs



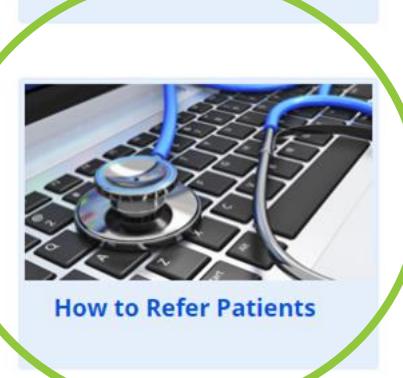
How to Talk to Patients
About Tobacco



How to Refer Patients



About National Jewish
Health



Web Referral

- Clinic or provider information is stored and saved
- Provider will be updated on patient's progress

Provider Web Referral

Patient Information

* Patient's first name

* Patient's last name

* Patient's DOB
 MM/DD/YYYY

Primary phone type
 Select

* Patient's primary phone
 555-555-5555

Secondary phone type
 Select

Patient's secondary phone

Best contact days
 Anytime

Best contact times
 Anytime

* Patient's address

Patient's address 2

* Patient's city

* Patient's state
 Select

Patient's preferred language
 English

Is it ok to leave a voicemail?
 Yes No

Is patient hearing impaired?
 Yes No

Patient's insurance provider

Insurance Member ID

Clinic Information

* Type of HIPAA covered Entity:
 Select One

* Provider First Name

* Provider Last Name

Contact First Name

Contact Last Name

* Clinic/organization name

* Clinic address

Clinic address 2

* Clinic city

* Clinic state
 Select

* Clinic zip code

* Clinic fax number

Fax Referral



Wyoming Quit Tobacco Program Fax Form

Fax to: **1-800-261-6259**

PROVIDER INFORMATION (PRINT CLEARLY)

Feedback will only be sent to HIPAA covered entities to the fax number listed below.

Provider First Name _____ Provider Last Name _____

Contact First Name _____ Contact Last Name _____

Name of Clinic and Department/Organization/Hospital/Department/Facility/Employer/Etc. _____

Address _____

City _____ State _____ Zip _____

Phone (_____) - _____ Fax (_____) - _____

Type of HIPAA Covered Entity: Healthcare Provider Health Plan Healthcare Clearing House Not Covered Entity

As a HIPAA covered entity you are authorized to receive personal health information for the individual being referred.

As a Not Covered Entity, personal health information will not be shared back for the individual being referred.

Provider consent is required to provide nicotine replacement therapy (NRT) to individuals who have certain medical conditions or are pregnant.

Does the patient have any of the following conditions? Pregnant Breastfeeding

(If Provider) I authorize the QuitLine to send the patient over-the-counter nicotine replacement therapy.

Please sign here if patient may use NRT. _____ Date _____
Provider signature _____

PATIENT INFORMATION (PRINT CLEARLY)

Patient name (First) _____ (Last) _____

Address _____

City _____ State _____ Zip _____

Phone (_____) - _____ DOB _____ / _____ / _____

Home Cell Work Language? English Spanish Other _____

OK to leave a message at number provided? Yes No Insurance? Yes No

Do you require accommodation while participating in the program such as TTY, Translator or Relay Service?

No Yes If yes, please specify _____

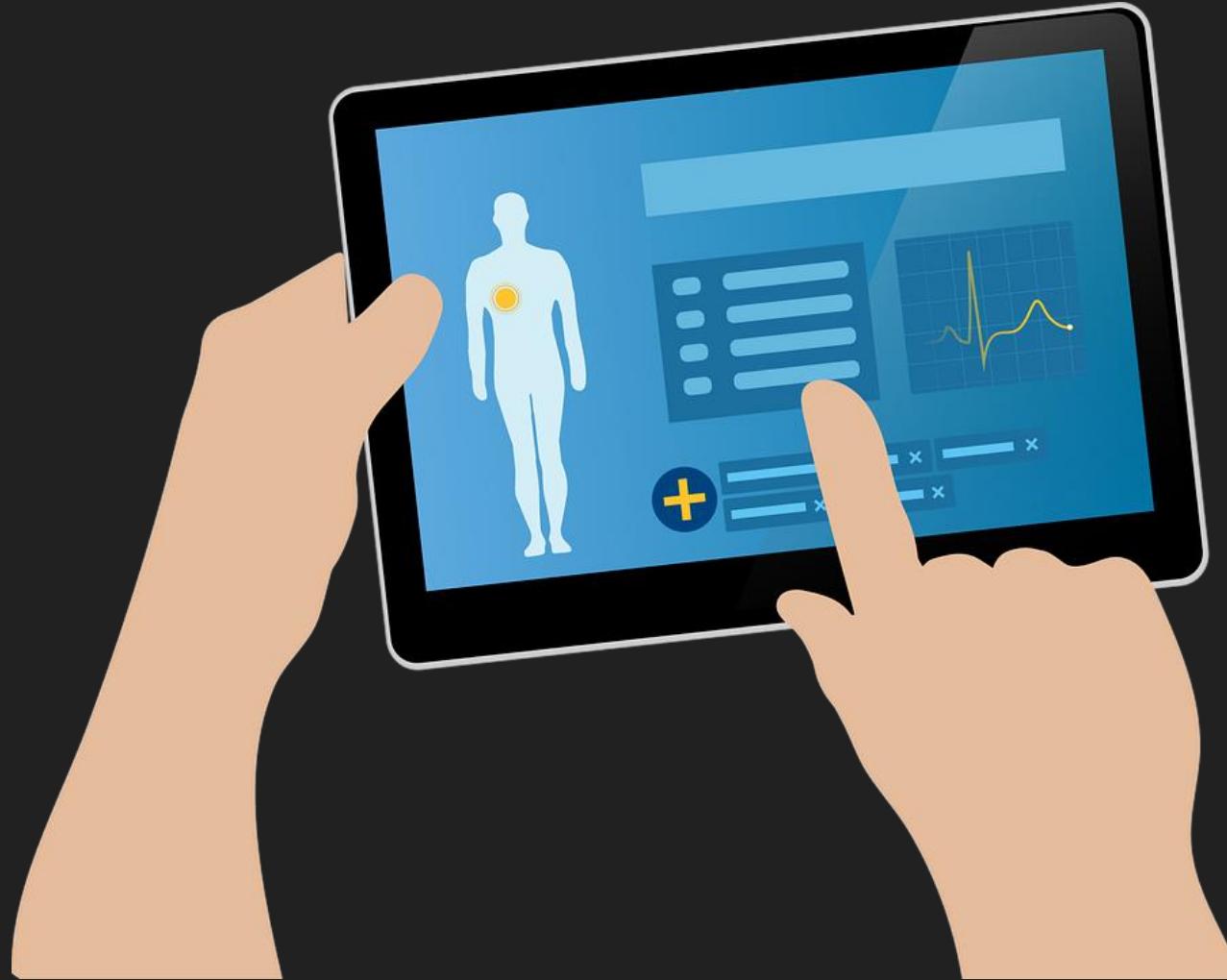
Medicare Medicaid

Other Name: _____

I, the patient (or authorized representative), give permission to release my information to the Wyoming Quit Tobacco Program. The purpose of this release is to request an initial phone call to discuss my interest and participation in the tobacco cessation program and allow communication with the provider identified on this form. I may revoke this authorization at any time in writing, but if I do, it will have no effect on actions taken prior to receiving the revocation.

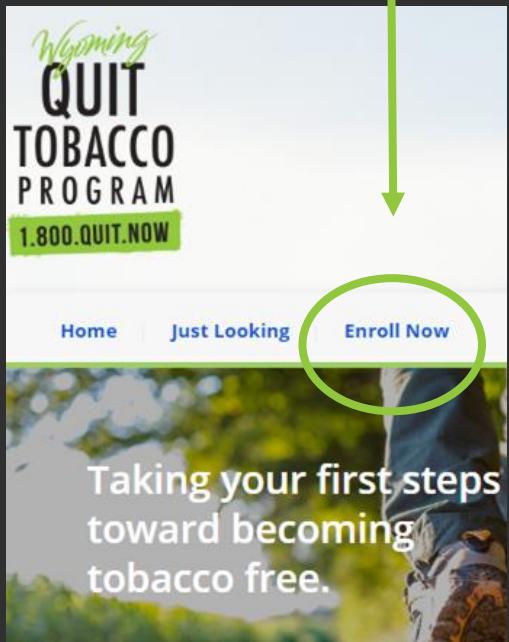
Patient Signature _____ Date _____

E-Referral



Self Referral

Web:



Enroll Now

1 2 3 4 All fields required

To enroll in the program, we need to get some information from you. The next several pages will ask you questions about you and your tobacco history. Once you have completed the questions, we will begin this journey together!

* What is your preferred language?
 English
 Spanish
 Other

* What is your gender? [Why?](#)
 Male
 Female
 Transgender

* Please enter your first name.

* Please enter your last name.

* What is your preferred phone number?

* Please enter your zip code.

* Please tell us when you were born.

* In which program would you like to participate? [Why?](#)
 Online Only
 Phone + Online

* Please enter your email address.

* Password
(include uppercase & lowercase characters, digits, non-alphabetic characters (e.g. !, \$, #, %))

Phone:

YOU CAN 1.800.QUIT.NOW

[quitwyo.org](#)

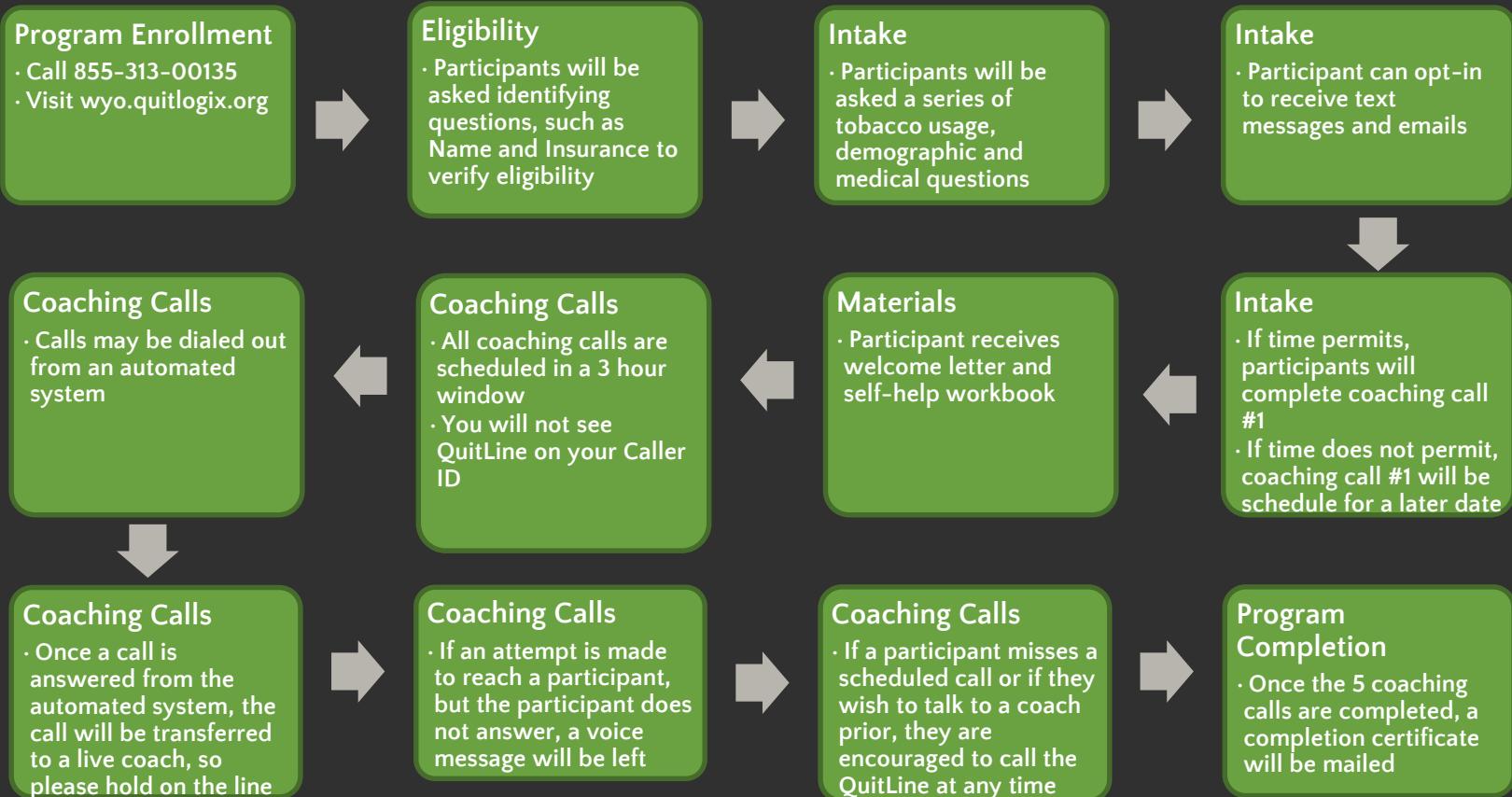
New week, new you. Show tobacco you're in charge with free coaching, gum, patches, and a customized quit plan to help you quit for good.

Call us or enroll online today.

The logo features the words 'Wyoming QUIT TOBACCO PROGRAM' in a stylized font. Above the word 'QUIT' is a circular graphic of three people holding hands. Below the main text is the text 'Wyoming Department of Health'.

Paid for by tobacco settlement and federal funds.

Participant Process:





Details:

Participants are required to participate in at least **3 coaching calls** to receive **12 weeks** of NRT or prescription medication

To receive prescription medications, enrollees need a prescription from a physician



Motivational Interviewing



Wyoming
Department
of Health

Client Centered Counseling Method

1. Guide the client towards internal motivation for behavior change



How would quitting improve their daily life?

2. Empower the client to come up with a personalized plan to quit



What is realistic for them?

Sustainable Behavior Change

People are more likely to quit, and stick with it, if they see value in doing so

Key Components:

Collaboration - Equal power relationship between patient and counselor.

Empathy - Understand the patient's perspective and needs. Never dismiss what they experience.

Honor Patient Autonomy - The patient is ultimately in charge of their decisions. Telling them what to do isn't effective.



Worst Practices:

- ✖ Tell the patient what they need to do
- ✖ Dismiss or minimize the patient's barriers to quitting
- ✖ React negatively to statements the patient makes about their tobacco use

Best Practices:

- ✓ **Understand** - Use open-ended questions to explore their history with tobacco use, barriers to quitting, and why they want to quit
- ✓ **Listen** - Reflecting what the patient says back to them shows you are listening. Acknowledge quitting is hard.
- ✓ **Empower** - Help sustain the belief that they can do it. Frame any past quit attempts as a success and a reason why they are capable of quitting.

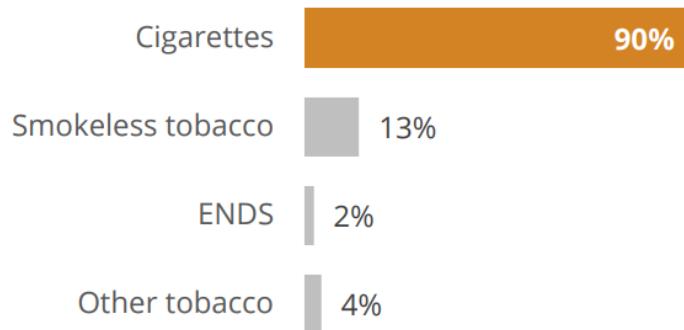


WQTP Enrollees who consent to a follow up survey are contacted 7 months after completing the program. The following figures were generated from surveys collected in 2018 and analyzed by the Wyoming Survey and Analysis Center.

Products:

Figure 3: Most Enrollees Wanted to Quit Cigarettes

Percentage of enrollees who wanted to quit using...



Note: n=738. Smokeless tobacco includes chewing tobacco, snuff, and dip. Other tobacco includes cigars, cigarillos, little cigars, hookah, pipes, and other tobacco not listed in the survey question. Percentages do not add to 100% because enrollees could choose more than one option.

Quit Rate:

Figure 5: About One Third of Enrollees Were Quit for 30 Days

Percentage of enrollees who had not used any tobacco in the past 7 or 30 days

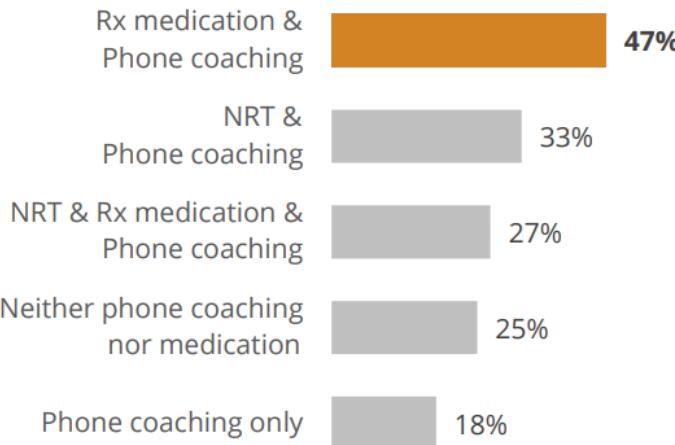


Note: n=738.

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Figure 6: Enrollees Who Used Phone Coaching & Rx Medication Had the Highest 30-Day Quit Rate

Percentage of enrollees who had not used any tobacco in the past 30 days by WQTP services used



Note: Use of Rx medication or NRTs requires use of phone coaching. Rx medication in this figure includes Chantix and Zyban/Wellbutrin. Coaching & Rx medication: n=174. Phone coaching & NRT: n=331. Phone coaching & NRT & Rx medication: n=22. Neither Phone coaching nor medication: n=172. Phone coaching only: n=39.

Source: WQTP intake survey, participant activity records, and Follow-Up Survey.

30%

of WQTP enrollees have
quit since 2013.

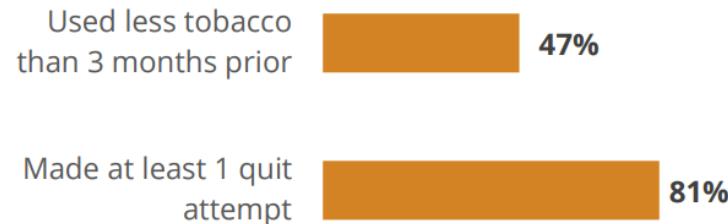
8%

Of Wyoming cigarette
smokers have quit without
using WQTP.

Progress Towards Cessation:

**Figure 7: Most Enrollees Who Had
Not Quit Made Progress toward
Cessation**

Of enrollees who were not quit, percentage who ...



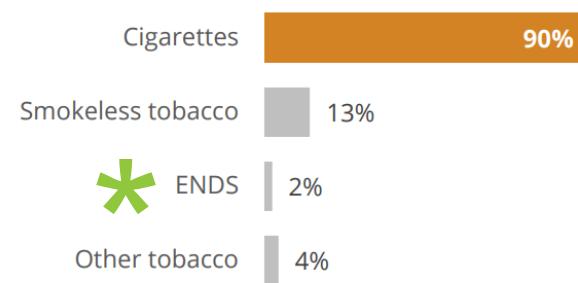
Note: Used less tobacco than three months prior: n=491.

Made at least one quit attempt: n=466.

ENDS Users:

Figure 3: Most Enrollees Wanted to Quit Cigarettes

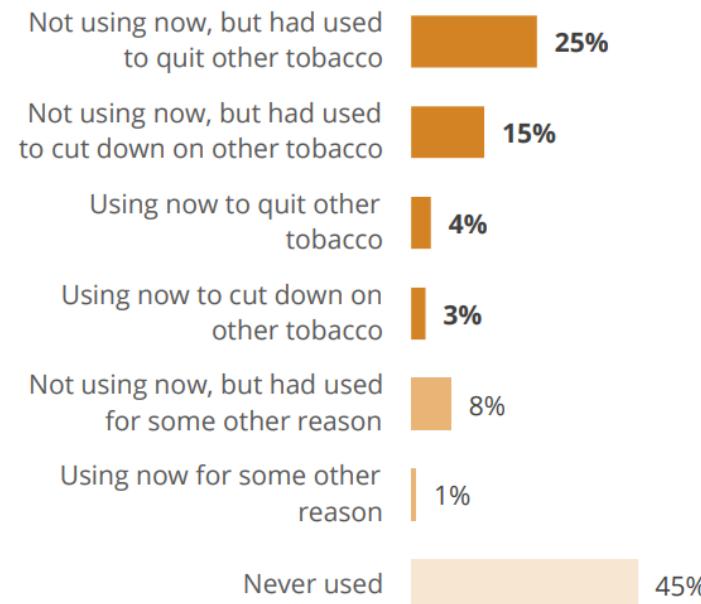
Percentage of enrollees who wanted to quit using...



Note: n=738. Smokeless tobacco includes chewing tobacco, snuff, and dip. Other tobacco includes cigars, cigarillos, little cigars, hookah, pipes, and other tobacco not listed in the survey question. Percentages do not add to 100% because enrollees could choose more than one option.

Figure 8: Over Half of Enrollees Had Used ENDS for Various Reasons

Percentage of enrollees ...



Note: n=737.

My Life, My Quit

- Coaches specifically trained to build relationships with youth
- 5 coaching sessions through phone, chat, or text
- 27/7 texting support available



Mental Health Conditions:

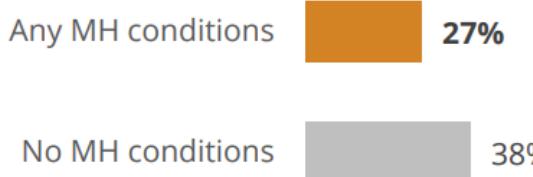
In 2018, 40% of participants reported a mental health condition at intake

People with mental health conditions are more likely to smoke cigarettes.

WQTP enrollees with mental health conditions are less likely to use prescription medications.

Figure 10: Enrollees with Mental Health Conditions Had a Lower Quit Rate

Percentage of enrollees who had not used any tobacco in the past 30 days



Note: n=293 for Any MH conditions; n=437 for No MH conditions.

Source: WQTP intake survey and Follow-Up Survey.

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Figure 11: More Enrollees with Mental Health Conditions Made Progress toward Cessation than Those Who Did Not Report Such Conditions

Used less tobacco than 3 months prior



Made at least 1 quit attempt



Note: Used less than 3 months prior: n=214 for Any MH conditions; n=272 for No MH conditions. Made at least 1 quit attempt: n=203 for Any MH conditions; n=258 for No MH conditions.

Source: WQTP intake survey and Follow-Up Survey.

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Pregnant Woman & American Indians



33 Enrollees reported being pregnant (at least 4 enrolled in the maternal protocol, only 5 responded to the survey)

14 American Indians enrolled in the American Indian Protocol

The sample size for both groups is too small to identify trends. We hope to have enough data to do so in the future.

A photograph of a pregnant woman with long dark hair, smiling and gently holding her pregnant belly. She is wearing a grey top and a blue cardigan. The background is a bright, possibly sunlit room.

Pregnancy Protocol:

Incentivized program:

- One on one coaching with a female coach
- \$5 Visa prepaid card per call while pregnant (up to \$25)
- \$10 Visa prepaid card per call postpartum (up to \$40)

Qualifications:

- Must be pregnant at the time of enrolment
- NRT or Cessation medication must be physician approved



AMERICAN INDIAN

Commercial Tobacco Program

- Tailored to the American Indian population
- Offers similar medication options
- Increased number of counseling sessions but shorter duration per session
- Native cessation coaches
- Respects traditional/ceremonial tobacco use
 - Ceremonial tobacco vs. addictive/harmful commercial tobacco

WQTP Satisfaction

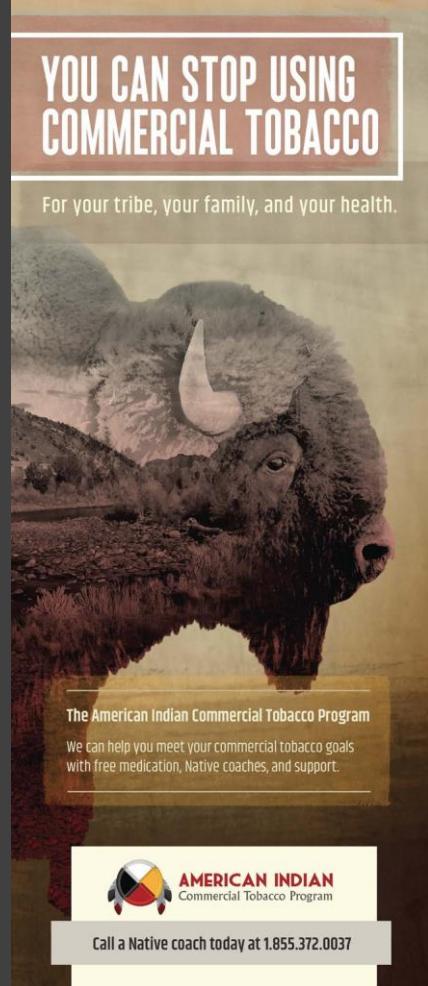
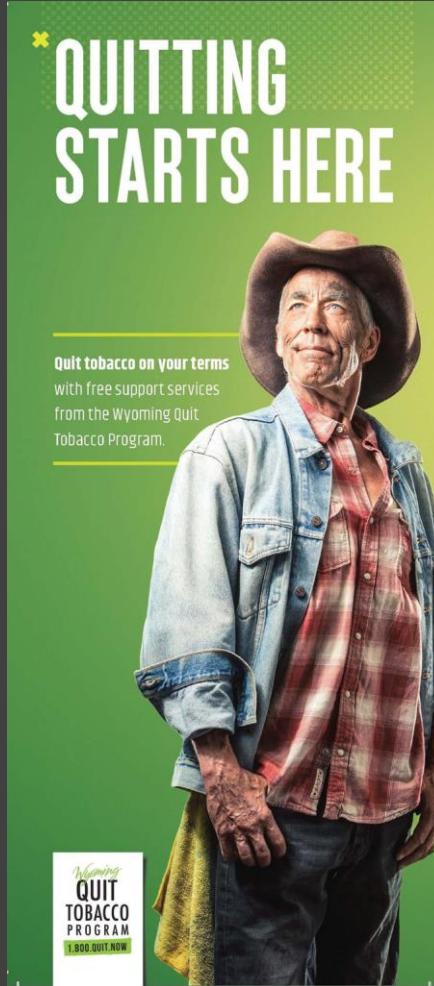
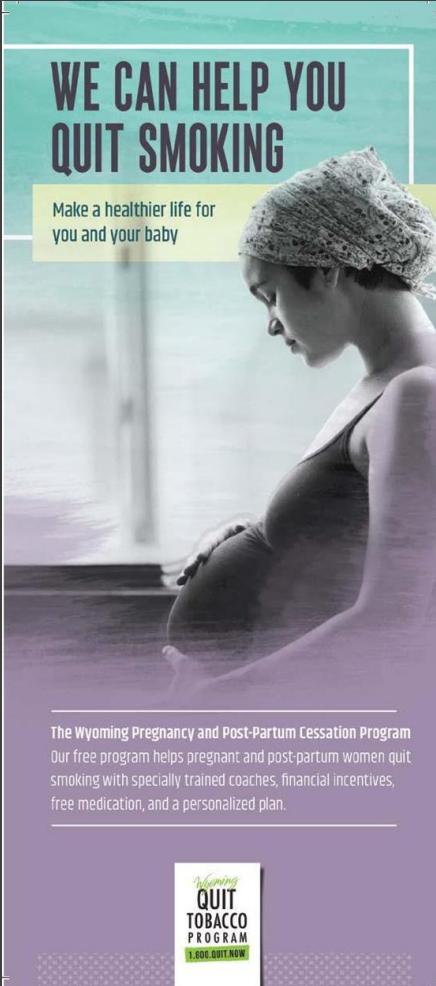
75% of enrollees were mostly or very satisfied with the program

**If you know of anyone having these difficulties please contact me so I can look into it.*

75% of enrollees reported no issues with the program. Those who did reported difficulty with the following*:

- Acquiring NRT products (16%)
- Getting Rx medications (12%)
- Contacting the program by phone (9%)
- Accessing the program on the internet (8%)

Promoting WQTP:





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