

Behavioral Health Tobacco Project



Statewide Tobacco Cessation and Prevention Efforts

KDHE's Chronic Disease Risk Reduction grants

Kansas Health Foundation released \$1.4 million in tobacco funding for 7 organizations from 2016-2019 with the option for continued work through 2022.

- Mental Health Association of South Central Kansas
- Central Kansas Foundation
- Prairie View
- DCCCA
- Breakthrough Episcopal Social Services
- NAMI Kansas
- University of Kansas School of Medicine

Behavioral Health Tobacco Project

Main Project Goals Include:

- Create statewide policy, practice, culture change to support tobacco prevention and treatment in substance use and mental health settings
- Support behavioral health and primary care providers in adopting and implementing the Tobacco Guideline for Behavioral Health Care
- Increase access to evidence-based treatment for individuals with SMI and SUD, especially for KanCare members
- Expand and increase utilization of insurance coverage for tobacco dependence treatment

Behavioral Health Tobacco Working Group

- American Heart Association
- American Cancer Society
- American Lung Association
- Association of Community Mental Health Centers of Kansas
- Community Care Network of Kansas
- CRO Network
- Kansas Academy of Family Physicians
- Kansas Association of Addiction Professionals
- Kansas Department for Aging & Disability Services
- Kansas Association of Local Health Departments
- Kansas Department of Health & Environment
- KU Medical Center
- Oral Health Kansas
- Tobacco Free Kansas Coalition
- Aetna, United Health Care & Sunflower State Health Plan
- WorkWell KS

2019-2022 Goals

- **Expand education and training for health care providers, adult peer audiences, and policy makers regarding the economic and quality of life benefits to be achieved by reducing dependence on tobacco products.**
- **Advocate for changes in public policy that will support expanded access to cessation treatment.**
- **Increase the number of behavioral health and primary care providers who are actively engaged in providing tobacco cessation treatment.**
- **Increase the number of adult tobacco users who participate in tobacco cessation treatment and experience success with quitting tobacco.**

Kansas Tobacco Guideline for Behavioral Health Care

Seeking voluntary adoption by providers and their associations who pledge to:

Kansas Tobacco Guideline for Behavioral Health Care

Revised 4/16/18

By endorsing this voluntary Guideline, this Program/Association affirms that:

Tobacco Use Disorder is the most prevalent substance use disorder in Kansas

- It often begins in late childhood/adolescence.
- Many, if not most individuals served by behavioral health care providers have co-morbid tobacco dependence.
- 40% of cigarettes smoked by adults in the U.S. are smoked by adults diagnosed with mental illness and substance use disorders (SUD).
- People diagnosed with severe mental illness die 8-25 years younger than the general population largely due to conditions caused/worsened by smoking (heart disease, cancer, & lung disease).
- Tobacco dependence causes approximately 50% of the deaths of long-term tobacco users.

Our Program/Association strives to provide a healthy environment for staff, clients, peers, volunteers, and visitors. Comprehensive integration of tobacco treatment into mental health and substance use treatment includes:

Promoting wellness by integrating evidence-based tobacco treatment into routine clinical practice

Building staff capacity to provide care

Adopting a tobacco-free environment

Engaging in tobacco cessation and prevention efforts among youth

- Support tobacco prevention efforts
- Promote wellness by integrating evidence-based tobacco treatment into routine clinical practice
- Build staff capacity to provide tobacco dependence treatment
- Adopt a tobacco-free environment
- Incorporate tobacco treatment into quality of care measures

Tobacco Guideline Endorsements

Provider Associations

- [Association of Community Mental Health Centers of Kansas](#)
- [Community Care Network of Kansas](#)
- [InterHab](#)
- [Kansas Academy of Family Physicians](#)
- [Kansas Association of Addiction Professionals](#)
- [Kansas Association of Local Health Departments](#)
- [Kansas Department for Aging & Disability Services](#)



**OneCare
Kansas**

Tobacco Guideline Endorsements

Provider Agencies

- [Bert Nash Community Mental Health Center](#), Lawrence
- [The Center for Counseling & Consultation](#), Great Bend
- [CKF Addiction Treatment](#), Salina
- [Crosswinds Counseling & Wellness](#), Emporia
- [Flint Hills Community Health Center](#), Emporia
- [High Plains Mental Health Center](#), Hays
- [Mental Health Association of South Central Kansas](#), Wichita
- [Prairie View](#), Newton
- [South Central Mental Health Counseling Center](#), El Dorado
- [Valeo Behavioral Health Care](#), Topeka

Section One: Promoting Wellness

- Assess tobacco use and provide treatment
- Provide psychosocial treatment
- Provide cessation medications
- Integrate tobacco treatment in assessments, treatment planning and implementation
- Incorporate tobacco treatment as part of other wellness and recovery efforts
- Monitor quality improvement to measure outcomes and improve services

Ask, Advise, Assess, Refer: AAAR

ASK

Ask every patient if they use tobacco

ADVISE

Advise every tobacco user to quit

ASSIST

Assist every smoker in selecting and using
a medication to help them quit

REFER

Refer all smokers for counseling

Medications and counseling can double or triple quit rates

ASK, ADVISE, ASSESS, REFER

AAAR = 4 Steps

- **Ask** Mary if she smokes
- **Advise** Mary to quit
- **Assist** Mary with medication
- **Refer** Mary to the Tobacco Quitline &/or Smokefreetxt
 - 1-800-QUIT-NOW
 - www.smokefreetxt.gov
 - <http://www.kdheks.gov/tobacco/cessation.html>

5 minutes

How much time does it take to save a life?

5 minutes



Section Two: Building Staff Capacity

- Train staff on treatment and prevention
- Seek payments for tobacco treatment
- Support staff who smoke to quit tobacco

Section Three: Tobacco-Free Environment

Enact A Comprehensive
Tobacco-Free Policy

Section Four: Focus on Youth

- Provide/support treatment for youth
- Conduct/support prevention efforts

Self-Assessment Checklist

Implementation Self-Assessment Kansas Tobacco Guideline for Behavioral Health Care

This self-assessment is a companion to the *Kansas Tobacco Guideline For Behavioral Health Care* (“Tobacco Guideline”): <https://namikansas.org/resources/smoking-cessation-information/>. The self-assessment identifies which Tobacco Guideline steps your program is, or is not, implementing. Completing this assessment will help identify strengths and targets for quality improvement in your program.

Please complete the following 12 items, which correspond to the 12 items in the Tobacco Guideline. Please circle one response for each item.
For assistance completing this assessment or implementing the Tobacco Guideline, please contact: kdads.prevention@ks.gov.

Promoting wellness by integrating evidence-based tobacco treatment into routine clinical practice

1. Our program has assessed tobacco use status among the following percentage of our current consumers/clients:

0	1	2	3	4	5
Not yet implemented	Few (10% or less)	Some (~25%)	About half (~50%)	Many (~75%)	Nearly all (90%-100%)

Evidence for level of implementation. Please describe how this was measured or evaluated. This may include actual data from medical records or staff estimates of the degree of implementation:

Self-Assessment Checklist Elements

- Agency rating on level of implementation
- Evidence for implementation
- Scoring
- Technical Assistance

Implementation Toolkit



**Kansas Tobacco Guideline
for Behavioral Health Care**
AN IMPLEMENTATION TOOLKIT

December 2018

Coming in 2019

**Tobacco Guideline
Mini-Grant Program**

Possible Mini-Grant Projects

- Implementing a tobacco-free grounds policy
- Developing signage for tobacco-free environments
- Renovation of formerly designated smoking areas
- Collect smoking information at intake to target patients for interest in cessation treatment
- Update systems to document cessation treatments, including counseling and medications
- Patient education materials
- Staff training

KanCare Coverage for Tobacco Cessation



KanCare

Are You Insured by KanCare?

Increase your odds and quit tobacco for good!

Quitting tobacco is hard. Expanded benefits from KanCare give you a better chance to succeed.

For the first time, KanCare is combining two programs with no copays:

- Tobacco cessation medications, including the nicotine patch, gum, lozenge, inhaler, nasal spray, Chantix or Zyban.
- Counseling services, from your health care provider, to support you while you try to quit.

This means if you don't succeed the first time, it doesn't end there!

Still looking for a reason to quit? Try these:

- Your health and appearance will improve
- More money and time to do the things you want to do
- Your loved ones

Ask your health care provider today!

For more information, contact:

 UnitedHealthcare 1-877-542-9238	 sunflower health plan. 1-877-644-4623	 aetna <small>Aetna is a member of Cigna</small> 1-855-221-5656
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Tobacco Cessation Treatment: What is covered?

Insurance	Counseling	Medications	Attempts/year	Cost-share
Medicare	4 sessions	At least one FDA approved prescription medications, including prescription NRTs [nasal spray and inhaler] - No over-the-counter NRTs [patch, gum, lozenge]	2	None
KanCare (Kansas Medicaid)	Unlimited	All FDA approved – Including combination therapy	4	None
Marketplace	4 sessions	All FDA approved – Plans may vary regarding prior authorization and step therapy. (90 days)	2	None
Employer-sponsored	4 sessions	All FDA approved (90 days)	2	None
Grandfathered plans*	Coverage varies by individual plan			



NAVIGATING THE REIMBURSEMENT MAZE

Audrey Darville PhD, APRN, CTTS, FAANP

BREATHE
Bridging Research Efforts and Advocacy
Toward Healthy Environments

Questions? Need More Information?

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See Tobacco Dependence tab at

www.namikansas.org