

County Care

A MEDICAID HEALTH PLAN







# Making an Impact Sunded by the Illinois Department of Public Health Impact

A partnership of the Illinois Department of Public Health and the American Lung Association



#### **ITQL: Illinois Tobacco Quitline**

- Partnership between the Illinois Department of Public Health's (IDPH) Tobacco Control Program and the American Lung Association (ALA).
- Work collaboratively with the IDPH's Tobacco Control Team under the Illinois Tobacco Quitline grant:
  - Gail DeVito, Tobacco Control Program Manager
  - Kristi Bunn Public Health Educator / Regional Tobacco Advisor
- Established in 2001

#### **ITQL: Illinois Tobacco Quitline**

- Tobacco cessation services for all residents in Illinois assisting with all forms of tobacco including e-cigarettes and vaping.
  - All residents 13 years of age and older are eligible to receive counseling.
    - Parental permission no longer required for callers aged 13 17.
- Building upon American Lung Association Core Beliefs About Tobacco Cessation:
  - Everyone can quit.
  - You don't have to quit alone.
  - Every moment you don't use a form of tobacco is a success.
  - You had to learn how to smoke/use tobacco and you have to learn how to quit.
  - It takes most tobacco users several tries before they're able to quit for good.
  - One size doesn't fit all.
  - Combine medication with a quit-tobacco program for the best results.
  - A slip isn't the same as a relapse.





- Local Health Departments
- Health Care Facilities:
  - Federally Qualified Health Centers (FQHC)
  - Health Systems and Hospitals
  - Private clinics
  - Behavioral health facilities and units
  - Dental offices
  - Chiropractic offices
  - Pharmacies
  - Cancer centers
- Community Service Agencies
- Public Housing Authorities



#### **ITQL Caller Reach in Fiscal Year 2023**

26,096

Number of calls (30 seconds or longer)

7,639

Total Number of Callers

4,344

Callers Enrolling for ITQL

Counseling

Callers Completing Online

Enrellment

ITQL Referrals (E-fax and

2,257

Callers receiving NRT with ITQL



## **ITQL Options for Access**



- Phone:
  - **866-QUIT-YES (784-8937)**
- Online Enrollment:
  - 24 hours per day/7 days per week
  - www.QuitYes.org
- Online Chat:
  - www.QuitYes.org







## **ITQL Operations**

#### Operating times:

- 7:00 AM to 9:00 PM Monday through Friday
- 9:00 AM to 5:00 PM Saturday and Sunday
- After Hours Answering Service

#### Languages available:

- Spanish speaking staff
- Interpretation services for 250+ languages
- Telecommunication line for individuals that are deaf or hard of hearing at (800) 501-1068

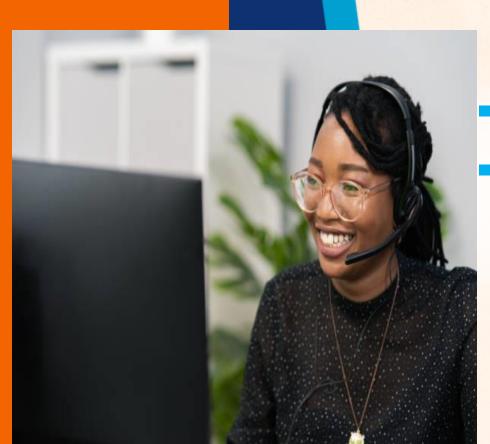


## ITQL Services Available to Callers and Referral

## Agencies

- Freedom From Smoking® Plus (<a href="https://www.freedomfromsmoking.org/">https://www.freedomfromsmoking.org/</a>): Online self-paced format, available via desktop, tablet, or smart phone.
- My Life, My Quit Program (<a href="https://mylifemyquit.org/">https://mylifemyquit.org/</a>): Teen vaping cessation program for teens 13 to 17 and is available 7 days per week, 24 hours per day (except Holiday).
  - Teens can text "Start My Quit" to 36072
  - Teens can chat with a Coach.
  - Teens can enroll Online.
  - Teens can call 1-855-891-9989.
- Motivational Text Messages: Callers can enroll to receive daily motivational text messages for 8 weeks and can opt out at any time.
- Reminder Text: Callers can enroll with a Counselor to receive reminder text messages of their weekly callin date and time.

Quarterly Referral Reports: Enrolled and active ITQL Referral Agencies will receive Quarterly Referral TOBACCO CONTRIBUTION OF THE PROPERTY OF



## Benefits of Talking to ITQL Counselors

- They are specialized in helping people quit.
- They are Certified Tobacco Treatment Specialists (CTTS) from:
  - Mayo Clinic Nicotine Dependence Center and Florida State University
  - Evidence-based interventions for tobacco dependence



## **ITQL: Special Populations**

- Mental Health Conditions
- Low Socio-Economic Status (SES)
- Pregnant Women
- Black; African American
- Hispanic/Latino
- Lesbian, Gay, Bisexual, Transgender (LGBTQ+)
- Military Veterans
- Disabilities

#### ASK, ADVISE, REFER

## **Role of the Health Care Team**



#### Ask, Advise, Refer

Nurse, medical assistant or other staff about tobacco use at every visit. Implement a system that queries and documents tobacco use status for every patient at every visit. DO YOU USE TOBACCO? YES Primary healthcare provider or trained staff tobacco users to quit. Urge quitting in a clear, strong, and personalized manner. **ARE YOU INTERESTED** Primary healthcare provider or any assisting staff IN QUITTING? Return to step 1. YES TOBACCO interested quitters.

#### Why Use Ask, Advise, Refer?

- Proactive approach towards patient health promotion.
- Follows national recommendations.
- Determines a patient's tobacco status and readiness to quit.
- Provides support to patients thinking about quitting and who are ready to quit.
- Nearly 70 percent of current smokers want to quit Ask, Advise, Refer has been proven successful.



#### **Short Term Effects of Tobacco Use**

- Lowers lung function
- Addiction to nicotine
- Shortness of breath
- Decreases senses of taste and smell
- Increases resting heart rate
- Skin appears pale and unhealthy
- Bad breath
- Diminished capacity in sports



#### **Stages of Change**

- Based on decades of research, the model states that individuals move through a series of stages during the adoption of healthy behaviors or cessation of unhealthy ones.
- The stages are:
  - Precontemplation Not ready to quit
  - Contemplation Thinking about quitting
  - Preparation Ready to quit
  - Action -- Quitting
  - Maintenance Staying quit
  - Termination Living quit



#### **Facilitating Behavior Change**

- We would think all tobacco users would quit if we:
  - Give them INSIGHT we can just make people see, then they will change.
  - Give them KNOWLEDGE if people just know enough, then they will change.
  - Give them SKILLS if we can just teach people how to change, then they will do it.
  - Give them HECK if we can just make people aware of the health consequences.
    - Behavior change is not driven by education, it is driven by motivation.



#### **Benefits of Quitting Tobacco Use**

- Improves health status and enhances quality life.
- Reduces the risk of premature death and can add as much as 10 years to life expectancy.
- Reduces the risk of many adverse health effects, including poor reproductive health outcomes, cardiovascular disease, chronic lung disease and cancer.
- Benefits the health of pregnant women and their fetuses and babies.
- Reduces the financial burden that tobacco use places on people who use health care systems and society.



#### **ITQL Referral Agencies**

## **Background**



#### **Benefits of Tobacco Quitlines**

- Reach a large number of tobacco users in a cost-efficient way.
- Reduce access barriers to tobacco cessation by providing a toll-free number that is flexible to the caller's schedule.
- Serve as a gateway to other cessation services (i.e., Nicotine Replacement Therapy).
- Resources for health care providers to refer clients seeking tobacco cessation.
- Offer a treatment service that is appealing to a broad number of clients regardless of race/ethnicity/geographic location/education level.



#### **Success of Tobacco Quitlines**

- Studies show that 3 to 5 percent of people can quit tobacco without any form of assistance.
- Quitlines: Double chances of quitting
- Quitlines + Nicotine Replacement Therapy (NRT): Triple chances of quitting
  - Combination Therapy Available, per IDPH NRT Distribution Guidelines
    - Patches, Gum, Lozenges
      - Highly dependent tobacco users



#### **ITQL Caller Experience**



#### **Initial Call**

- Approximately 30 minutes
- Basic caller information
- Other health information
- Demographic information
- Health insurance status



#### **Tobacco Cessation General Information Intake**

- Reason for quitting
- Previous quit attempts
- Dual usage
- Already quit
- Quitting method
- Confidence of quitting



#### **Nicotine Dependence Assessment**

- Current Tobacco Use:
  - How long they have been using tobacco?
  - Which products they use?
  - How often they use tobacco products?
  - How many per day?
  - How soon after waking up?
- Information used to determine which Nicotine Replacement Therapy is recommended.



#### **Cessation Products**

- Nicotine Replacement Therapy (NRT) products:
  - Patches
  - Gum
  - Lozenge
  - Inhaler
  - Nasal Spray
- Non-nicotine medications:
  - Bupropion
  - Varenicline
- Note: Electronic Cigarettes are not an FDA approved NRT and should not be recommended for tobacco cessation.



#### Free Nicotine Replacement Therapy (NRT) Program

- Callers are excluded from NRT eligibility for the following reasons:
  - Under age 18
  - Pregnant
  - NRT is medically contraindicated
  - Medicaid only insurance -- Eligible for 2-week starter NRT Starter Set
  - Private insurance coverage for NRT products
  - Enrolled in other NRT distribution program (i.e., worksite wellness)
- NRT products available, based on ITQL individualized quit plan:
  - Patches, Gum, Lozenges up to an 8-week supply, with weekly ITQL counseling sessions (2 weeks supply at a time)
- Eligible callers may receive up to an 8-week supply twice during a 12-month period. The first 8-week supply of NRT is given during the initial process. The second supply is given at the 7-month follow-up, if needed.



#### **Medicaid Enrollees and NRT**

#### Medicaid Coverage:

- As of December 4, 2023, the Illinois Tobacco Quitline is providing a free 2-week starter set of over-the-counter Nicotine Replacement Therapy (patches, gum, or lozenge) two times per year to clients that report having Medicaid as their primary health insurance and are interested in receiving NRT to support their quit attempt.
- Medicaid clients are eligible for 90 days of all 7 FDA-approved quit medications prescribed by their primary health provider. The 2-week starter set allows the client time to schedule an appointment with their primary health provider and pick up their prescription while receiving support from ITQL Counselors.

#### **Important:**

- A primary health provider prescription is required.
- The primary health provider may need to see the patient to write a prescription and/or can send the prescription to the pharmacy of choice.
- The Quitline cannot write prescriptions.



#### **After Initial Call**

- Before the initial call ends
  - Quitline schedules and initiates 3 additional follow-up calls (proactive approach).
  - Caller can reach out to the Quitline as needed.
- Caller will have the option to enroll in an 8-week motivational text message program:
  - Available in English and Spanish
- Quitline sends each enrolled caller cessation resources by email or regular mail.
- If eligible for the NRT Program, a caller may receive up to 8-week supply of NRT.
  - Average caller will be in contact with the Quitline weekly for 4 weeks.



#### **Follow-Up Contact with Caller**

- Conducted at 7 months after the caller's first call with the Quitline (recommendation set by the North American Quitline Consortium).
- Only callers who agreed to receive a follow-up call are contacted regarding current quit status.
- The 7-month call data is used to calculate the Illinois Tobacco Quitline annual quit rate FY23 data: 29% for tobacco and 70% for e-cigarettes and dual users.



#### Resources for ITQL Referral Agencies



## ITQL Tobacco Treatment Enrollment Form

When an agency completes the ITQL Referral Agency Registration Form, the following ITQL Tobacco Treatment Enrollment Form will be created and sent in English and Spanish.

PIDPH HOLLIER BLATTE SALATION LITTER	TOBACCO QUITLINE
Tobacco Treatment Enrollment Form	YOUR QUIT, YOUR CALL 1-866-Guit-Yes   Quityes.org TTY 1-800-601-1068
CLIENT INFORMATION - Please Print and Stay in the Boxes	1111-000-001-1000
FIRST NAME	
LAST NAME	
MAILING ADDRESS	
CITY STAT	E ZIP CODE
EMAIL ADDRESS	
EMAIL ADDRESS	
PHONE NUMBER ALTERNATE PHONE DATE OF	FRIRTH
GENDER RACE / ETHNICITY	
MALE TRANSGENDER	
FEMALE NON-CONFORMING/NON-BINARY	
LANGUAGE	
ENGLISH SPANISH OTHER (SPECIFY)	
PREGNANT MEDICAID PARTICIPANT MAY WE LEAV	E A MESSAGE?
YES NO YES NO YES	NO
WHEN SHOULD WE CALL?	
7 AM - 10 AM 10 AM - 1 PM 1 PM - 4 PM 4 PM - 7 PM	7 PM - 9 PM
CLIENT SIGNATURE	
I authorize my provider to release the information on this enrollment form to Illinois Tobacco Quittine for purp in the tobacco cessation program and also authorize the Illinois Tobacco Quittine and it representatives to co number(s) I have listed above. I give the Quittine and the referring agency permission to discuss my use of s	intact me at the phone
SIGNATURE OF CLIENT OR CLIENT REPRESENTATIVE DA	TE TIME
PRINTED NAME OF CLIENT OR CLIENT REPRESENTATIVE RE	LATIONSHIP
HEALTHCARE PROFESSIONAL	
SIGNATURE of Clinic Personnel	
EMAIL FORM TO: referral@helpline.lung.org OR FAX FORM TO:	1-855-784-8329



#### **ITQL Referral Agency Options**

- Secure e-mail:
  - Referral@helpline.lung.org
- Paper fax referral:
  - Secure Fax: 1-855-784-8329
- E-Direct Referral (one-directional):
  - Coordinate a teleconference between the ITQL and Agency's IT Team to discuss integration.
  - ITQL will create a secure Web portal link to electronically send referrals to the ITQL secure server.
- EMR/EHR referral Electronic Medical/Health Record:
  - Bi-directional electronic process for referrals
    - Approval by the Illinois Department of Public Health



#### **ITQL Promotional Materials**

- ITQL material order form.
- Sample ITQL materials available:
  - Business cards, rack cards, tear off pads, posters.
- The material order form is available on the ITQL Web site: www.QuitYes.org
- Material order forms can be submitted via:
  - Web site: www.QuitYes.org
  - Email: info@quityes.org





## THANK YOU!

Do you have any questions?
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Counselor and
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## **Guiding Principles**

- We recognize that housing and meeting other social determinants are an integral aspect of one's overall health.
- We continually strive to learn more about our patients' experiences of housing insecurity to ensure high-quality, patient centered interventions are provided.
- We understand that every patient's housing journey is different, and we strive to advocate for resources to meet those needs.
- We acknowledge the role that structural racism plays in this work and move towards social justice through advancing health equity.



## **CCH Housing Programs At A Glance**

Flexible Housing Pool (2018)

Supportive Housing

Housed over 1,000 participants in program

Recuperation in a Supportive Environment (RISE) (2020)

Medical Respite

272 Patients Served

Housing Navigation Program (HNP) (2023)

Navigation Services and Supports

Supported over 100 patients in resolving their housing crisis through diversion or other resources



## **RISE Program**

- Accepts direct referrals from CCH/CountyCare staff for patients experiencing homelessness and in need of recuperative care post-hospitalization.
- Patients receive both clinical care as well as case management services to identify shelter options upon discharge.
- Referral Process:
  - o Please send an email to **mrc@cookcountyhhs.org** with the heading "New Referral" and include the (1) patient's initials, (2) referring person's name and contact number, (3) the relevant service areas, and (4) confirmation that the patient satisfies all requirements and exclusion criteria in the body of the email. If you don't get a call within 2 hours, please call the Program Director of the day at (708) 738-6861. A brief conversation is required to determine the patient's eligibility.



## Housing Navigation Program (HNP)

- Works with any CCH patients/CountyCare member who are experiencing a level of housing insecurity such as:
  - Couch Surfing
  - Non-Affordable Housing
  - Homelessness

 Housing Navigators provide services such as subsidy application assistance, affordable housing searches, utility and accessibility support, eviction prevention, access to shelters, etc.



## **HNP Referral Process**

CCH/Countycare Staff complete referral packet and send to housing@cookcountyhhs.org



CCH Housing Staff review packet and assign service provider based on referral's housing location preference.



CCH Housing Staff send an email to connect referral source and provider for follow up.



Service provider follows up six months post housing resolution to support with additional resources as needed.



Service provider continues to work with referral until housing crisis is resolved.



Service provider reaches out to referral within 48 hours of receipt to complete housing assessment and begin interventions.





### **Questions and Contact:**

Chante' Gamby 312.864.1154 chante.gamby@cookcountyhhs.org

## **Announcements**

- Next webinar is September 18th, 2024!
- Slides posted on CountyCare Care Coordination Webpage:
  - http://www.countycare.com/carecoordination

- Have feedback? Please share.
  - https://redcap.link/23k1fzzb



Please email questions/concerns: raphael.daniels@cookcountyhealth.org

