

EVALUATING VERMONT'S MEDICAID CESSATION BENEFIT INITIATIVE

VDH/DVHA Meeting
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A Framework for Effective Promotion of a Medicaid Tobacco Cessation Benefit

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Tobacco burden is significantly greater among those insured by Medicaid, with a smoking prevalence about twice as high as the national average (28% vs. 15%). Over the past decade, smoking prevalence among those insured by Medicaid has remained relatively unchanged while overall smoking prevalence in the United States and among other insurance groups decreased. This indicates need for targeting tobacco control strategies to those insured by Medicaid. In response, the Vermont Tobacco Control Program (VTCP) set out to implement best practice by making its Medicaid cessation benefit more comprehensive and raising awareness and use of the benefit to support members in quitting. The VTCP collaborated with its Medicaid and health department leadership to implement this initiative, learning and adapting processes along the way. The VTCP identified

► INTRODUCTION

Tobacco use remains the leading cause of preventable disease, disability, and death in the United States (Centers for Disease Control and Prevention [CDC], 2017). In 2015, 15% or 36.5 million adults in the United States were current cigarette smokers. Tobacco use and burden vary across populations, with disparity in smoking prevalence being consistently greater among those with lower socioeconomic status (U.S. Department of Health and Human Services, 2014). In 2015, smoking prevalence among adults insured by Medicaid was 28%, almost twice the national average (Jamal et al., 2016). Smoking prevalence among Medicaid members remains relatively unchanged over the past decade while progress has been made in reduc-

Williams, R.K., Brookes, R.L., Singer, E.R. (2020). A framework for effective promotion of a Medicaid tobacco cessation benefit. Health Promotion Practice, 21(4), 624-632.

The Economic Benefit of Reducing Smoking Prevalence among Medicaid Insured Vermonters

Tobacco Medicaid Initiative is anticipated to decrease spending in 2019

Strategic Collaboration

In 2012, the Vermont Tobacco Control Program (VTCP) began collaborating with the Department of Vermont Health Access (DVHA) to implement best practices¹ by making Medicaid benefits for smoking cessation more comprehensive and accessible.



Effect on Quitting and Smoking among Medicaid Insured

From 2013 to 2018, the proportion of ever smokers who became former smokers in the past year (Quit Ratio) more than doubled, while smoking declined from 36% to 29% among Medicaid-insured adults. This includes a 2% decline in smoking between 2017 and 2018 alone².



Estimated cost savings in 2019 of \$12.2 million

Measures of Success Among Medicaid Members...

- Reduce cigarette smoking
- Increase quit attempts and quit ratio
- Increase provider interaction (AAR)
- Increase registrants to 802Quits
- Increase provider utilization of cessation counseling codes
- Increase NRT prescriptions

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 - Family/General Practice and OBGYN
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Tobacco Medicaid Initiative Cessation Counseling Dashboard CY 2019

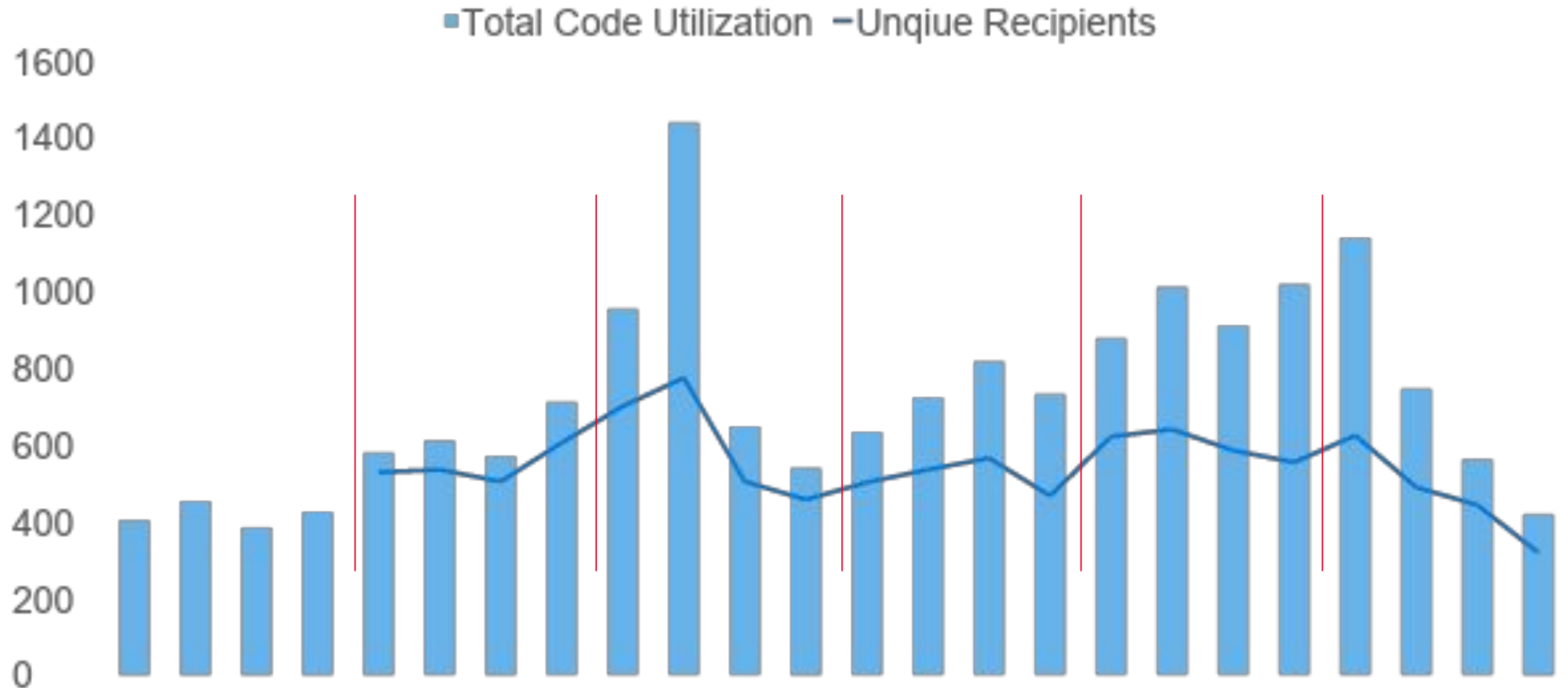
This dashboard displays quarterly data and year-end totals regarding cessation counseling claims (CPT codes 99406 + 99407) for the Tobacco Medicaid Initiative. We're tracking total number of claims, unique users, uses by priority provider types, and amount paid for all cessation counseling claims. For questions about the dashboard, please contact Erin Singer, erin_singer@jsi.com

Total # of Claims

Cessation Counseling	Q1	Q2	Q3	Q4	Quarterly Trends
Total # Paid Claims- 99406 + 99407	1,138	745	562	419	
99406 (Brief Counseling)	1,086	715	538	392	
99407 (Intensive Counseling)	43	22	16	24	
D1320 (Dentist)	9	8	8	3	
Total Unique Recipients*	624	489	443	319	
Cost of Paid Claims	\$13,292	\$8,545	\$6,808	\$5,081	
Total Claims - Pregnant Smokers	6	8	4	4	
Total Claims - Family + General Practice	567	450	204	156	
Total Claims - OB/GYN	43	33	25	11	
Total Claims - Dentist	10	9	8	3	
Total Claims - Pediatrician	11	22	11	21	

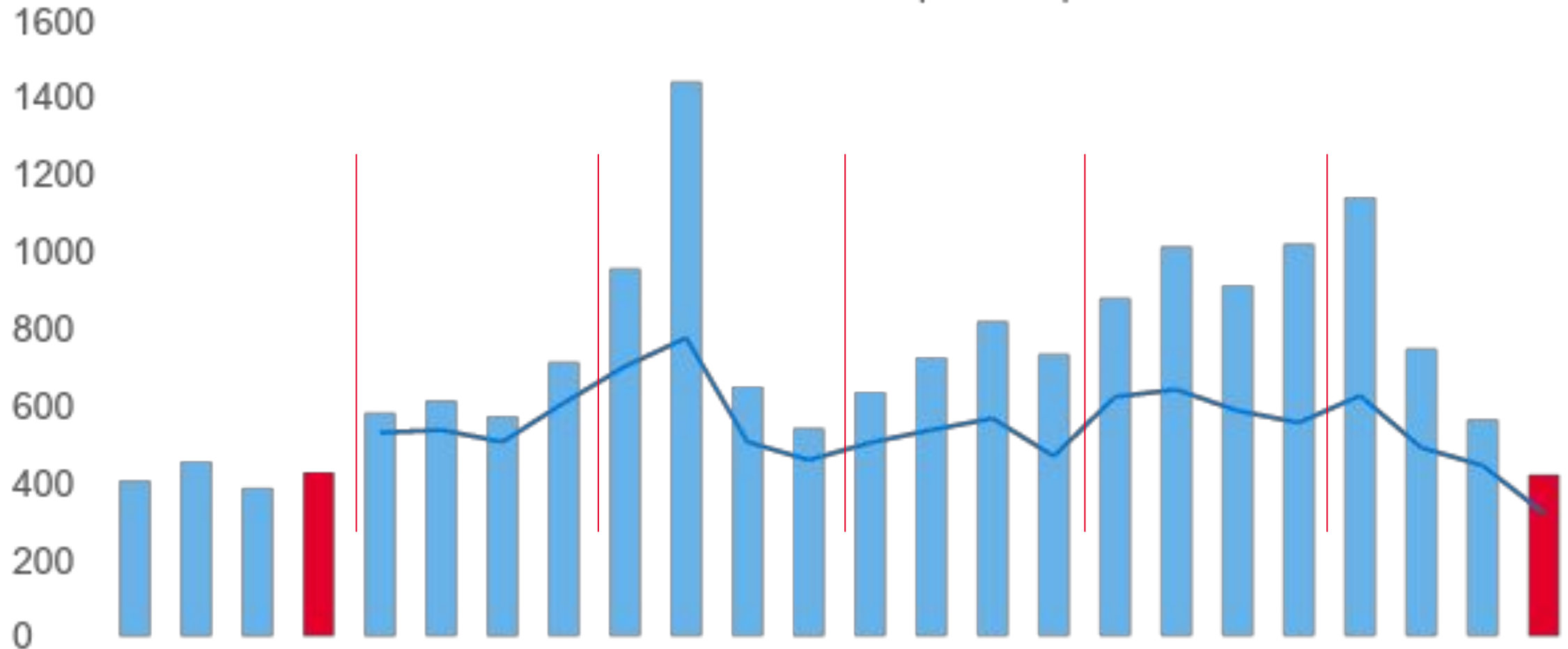
*Total unique recipients by quarter does not sum the annual count because the annual count does not include duplicates across quarters

of Cessation Counseling Paid Claims and Unique Users per Quarter (2014-2019)



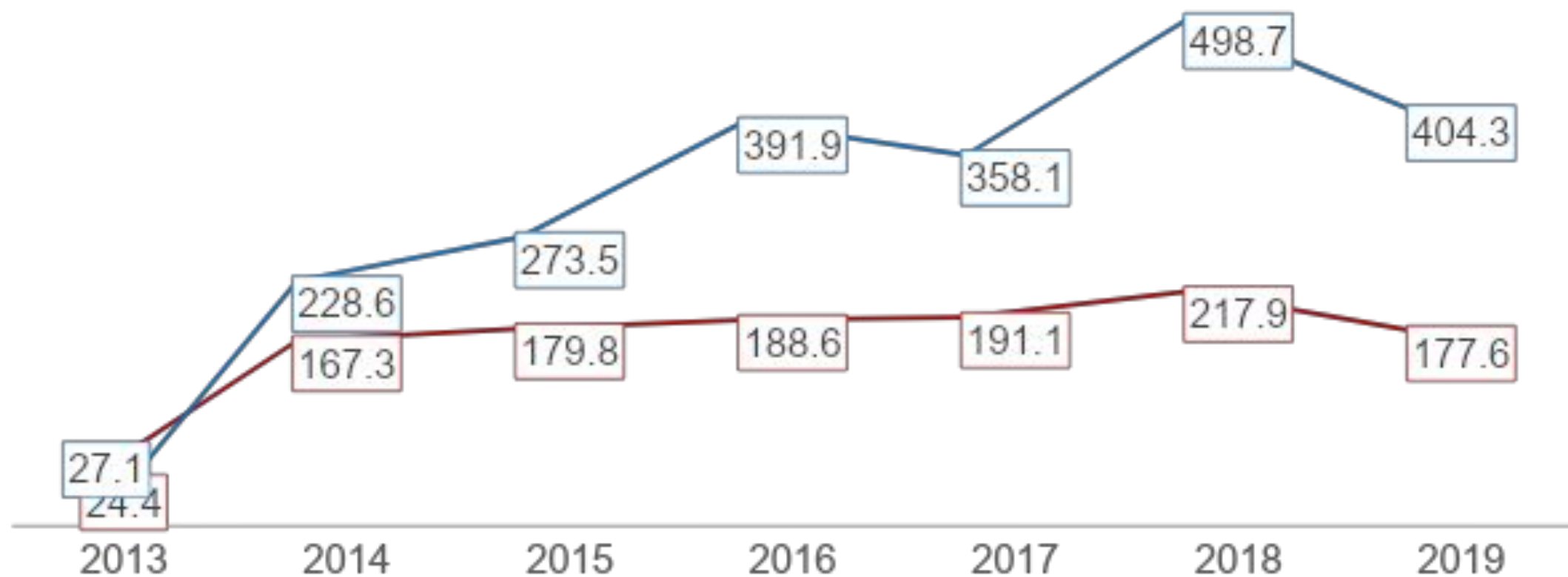
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■ Total Code Utilization — Unique Recipients



Rate of Cessation Counseling Code Usage per 10,000 Medicaid Members (2013-2019)

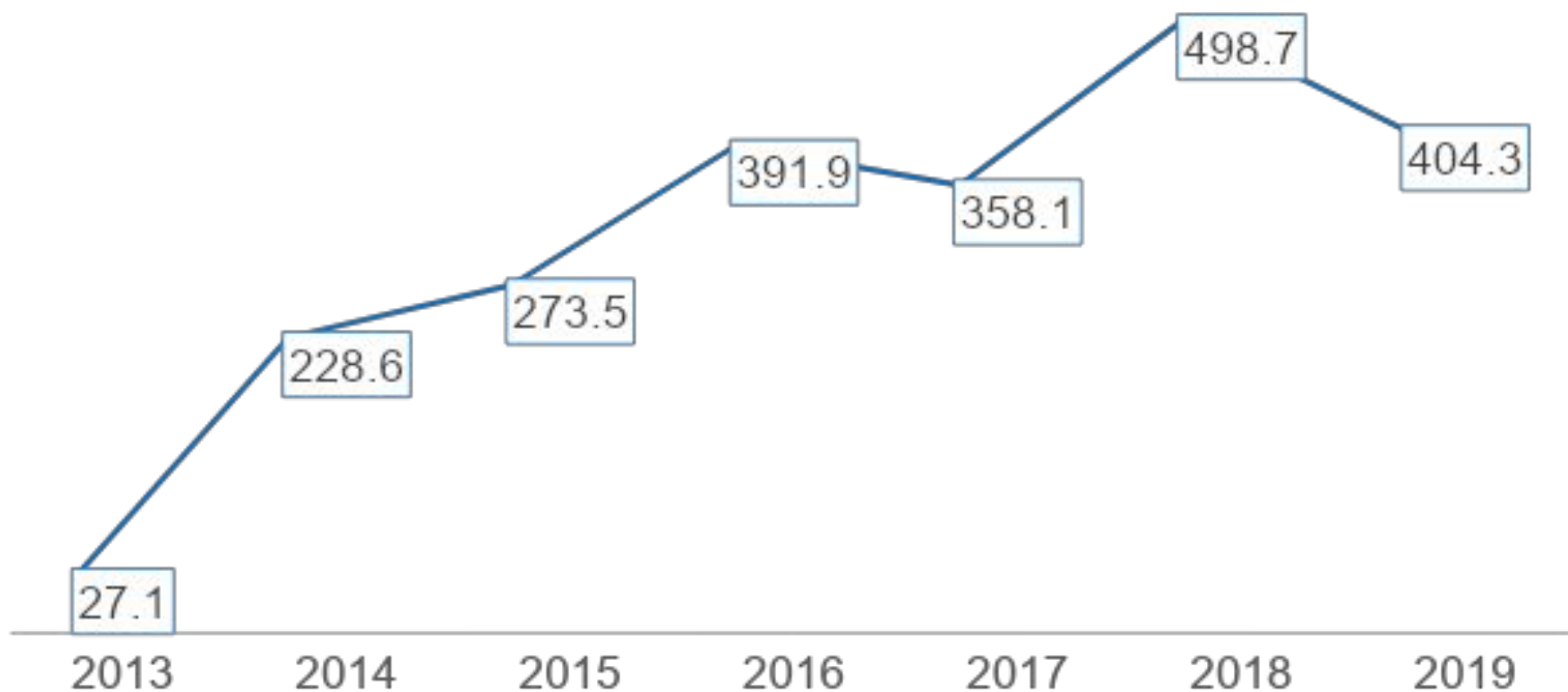
— Unique Recipients — Total Cessation Counseling Claims



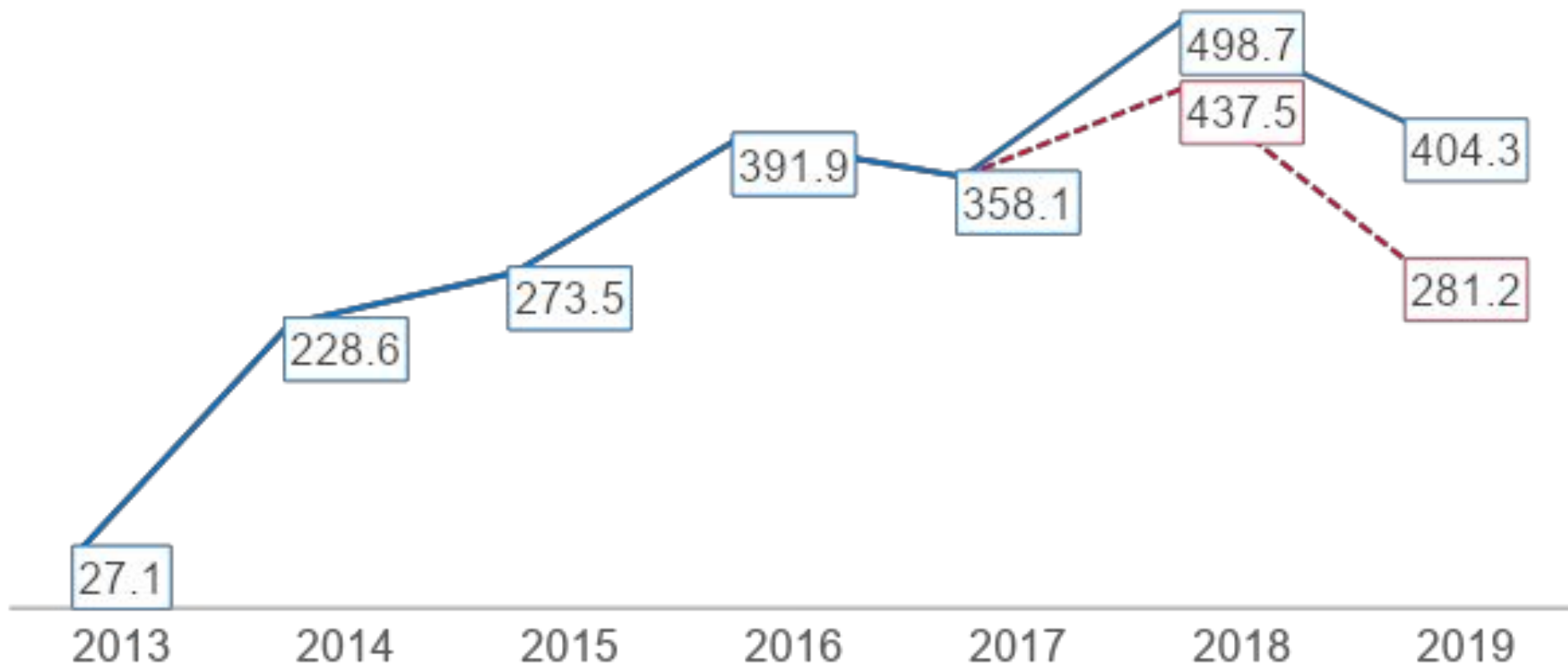
Cessation Counseling	2019 Year- End Totals	2019 Goal	Progress to Date
Total # Paid Claims- 99406 + 99407	2,864	4,000	72% 
99406 (Brief Counseling)	2,731		
99407 (Intensive Counseling)	105		
D1320 (Dentist)	28		
Total Unique Recipients*	--	1,800	
Cost of Paid Claims	\$ 33,726		
Total Claims - Pregnant Smokers	22		
Total Claims - Family + General Practice	1,377	1,150	120% 
Total Claims - OB/GYN	112	300	37% 
Total Claims - Dentist	30		
Total Claims - Pediatrician	65		

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Rate of Paid Cessation Counseling Claims per 10,000 Medicaid Members (2013-2019)





Rate of Paid Cessation Counseling Claims per 10,000 Medicaid Members (2013-2019)



Quitline/Quit Online***

Progress Towards Our Year-End Goals

	Progress- to-Date	2019 Goal	% of goal achieved
% of QL Registrants - Medicaid Members	21%	28%	75% 
% of QO Registrants - Medicaid Members	12%	14%	86% 
% of Medicaid Referred by Provider to QL	30%		

Historical Patterns

	2013	2014	2015	2016	2017	2018	2019	Trend
% of QL Registrants - Medicaid Members	16%	22%	27%	27%	28%	26%	21%	
% of QO Registrants - Medicaid Members				15%	11%	13%	12%	
% of Medicaid Referred by Provider to QL	32%	29%	33%	32%	36%	23%	30%	

***Progress-to-date is most recent quarter with complete data. Historical patterns for Quit Online begin in 2016 because of methodological changes.

Tobacco Medicaid Initiative Pharmacotherapy Dashboard

CY2019

This dashboard displays quarterly data and year-end totals regarding pharmacotherapy claims (cessation medication and NRT) for the Tobacco Medicaid Initiative. We're tracking total number of prescriptions, unique users, and amount paid for all pharmacotherapy claims. For questions about the dashboard, please contact Maria Roemhildt, maria.roemhildt@vermont.gov

Tobacco Pharmacotherapy (NRT)	Q1	Q2	Q3	Q4	Quarterly Trends
Total # of Claims	2,769	2,667	2,422	2,295	
Bupropion HCL	26	32	21	42	
Chantix	623	657	567	497	
Nicotine Gum	547	537	519	521	
Nicotine Lozenge	285	305	289	249	
Nicotine Patch	1,226	1,102	978	943	
Nicotrol Inhaler	62	34	48	37	
Nicotrol Nasal Spray	-	-	-	6	
Total Unique Recipients*	1,982	1,867	1,663	1,587	
Cost of Paid Claims	\$362,756	\$361,257	\$323,095	\$289,821	

* Total unique recipients by quarter does not sum to the annual count because of the annual count does not include duplicates across quarters

Tobacco Medicaid Initiative Pharmacotherapy Dashboard

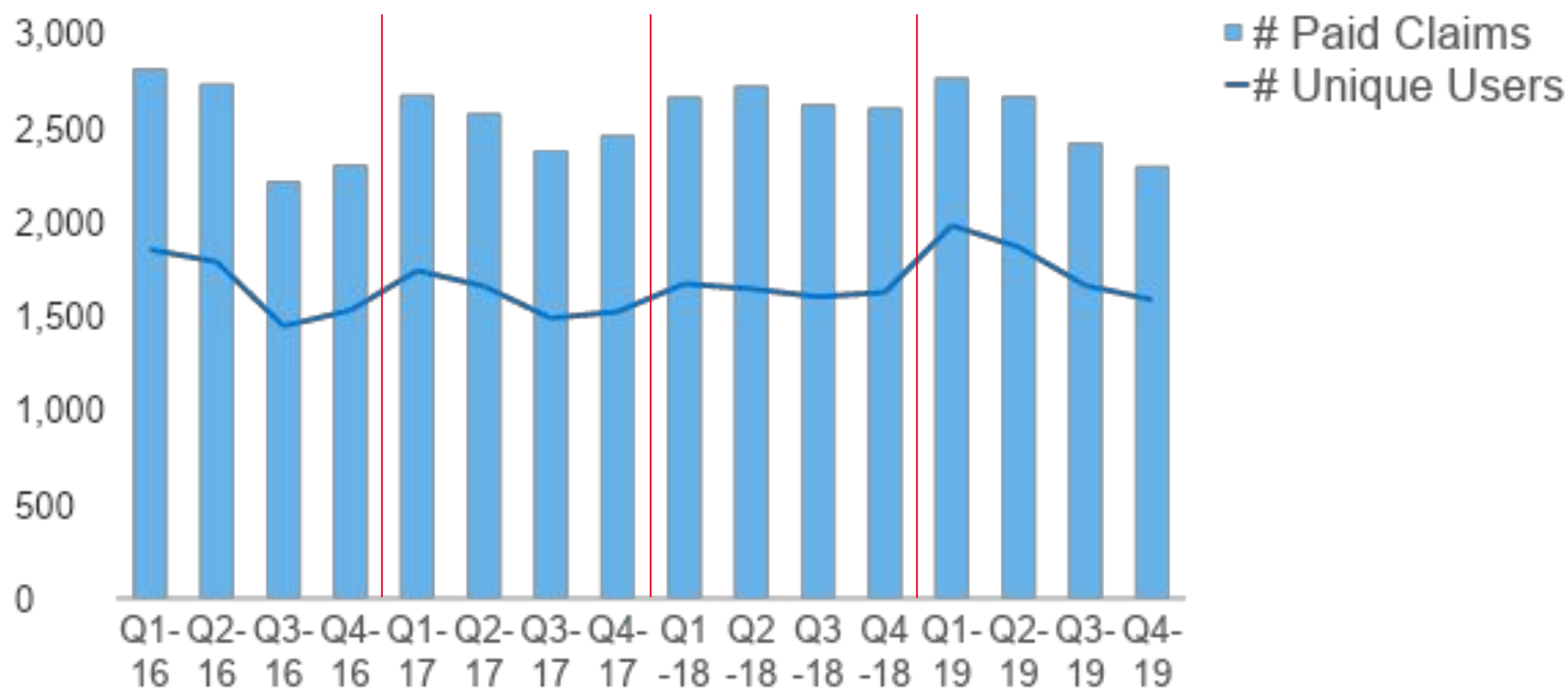
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Number of Days Therapy for Tobacco


Pharmacotherapy	Q1	Q2	Q3	Q4	Quarterly Trends
Total Days Therapy	55,074	52,484	47,395	45,064	
Bupropion HCL	780	923	585	1,245	
Chantix	17,065	17,940	15,514	13,753	
Nicotine Gum	5,742	5,443	5,454	5,656	
Nicotine Lozenge	2,804	2,780	2,959	2,628	
Nicotine Patch	27,765	24,860	21,993	21,064	
Nicotrol Inhaler	918	538	890	638	
Nicotrol Nasal Spray	0	0	0	80	
Average # Days Therapy per User	27.8	28.1	28.5	28.4	

Total Number of Paid Claims for Tobacco Pharmacotherapy per Quarter (2014 - 2019)



Pharmacotherapy

Progress Towards Our Year-End Goals

	Progress -to-Date	2019 Goal	% of goal achieved
Total # Paid Claims	10,153	11,000	92% 
Bupropion HCL	121		
Chantix	2,344		
NRT*	7,688		

Recommendations: Additional Evaluation

- Ongoing monitoring and evaluation; include DMH if possible
 - Add dentists and pediatricians to MOS
- Healthcare utilization and costs (e.g., IP stays, ED visits, etc.), particularly with regards to CHD/CVD and respiratory diagnoses. Any differences by demographics (e.g., gender, race, age)?
- Pharmacotherapy/NRT data
 - Chantix use over time, including course of therapy/adherence rate. Was other NRT (e.g., lozenge or gum) received at the same time?
- Qualitative data collection with Medicaid providers to better understand the use of CPT codes

Recommendations: Using Lessons Learned

- Cessation Needs Assessment
 - *How* instead of *why*: move beyond motivation to readiness to quit and resources available.
 - Providers should use trauma-informed framework
 - Address root causes, such as financial insecurity, mental health, and social network triggers
- 802Quits Engagement
 - Medicaid members use of Quitline (in 2018, 28% among smokers, 26% among registrants to Quitline)
 - Medicaid insured registrants to the Quitline has been steady from 2015 to 2018, and then large decrease from 2018 to 2019 (2019 = 21%).
- 802quits.org/providers webpage

Thank You!

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JSI RESEARCH & TRAINING INSTITUTE, INC.

Tobacco Medicaid Initiative CPT Historical Trends

CY 2013-2019

This dashboard displays historical trends using annual data regarding cessation counseling claims (CPT codes 99406, 99407) for the Tobacco Medicaid Initiative. We're tracking total number of claims unique users, claims by priority providers, and amount paid for all cessation counseling claims. For questions about the dashboard, please contact Erin Singer, erin_singer@jsi.com.

Cessation Counseling	2013	2014	2015	2016	2017	2018	2019	Trend
Total # Paid Claims- 99406 + 99407	171	1,602	2,468	3,578	2,903	3,816	2,864	
99406 (Brief Counseling)	151	1,506	2,237	3,383	2,698	3,614	2,731	
99407 (Intensive Counseling)	19	96	231	195	205	194	105	
D1320 (Dentist)						8	28	
Total Unique Recipients*	154	1,173	1,622	1,722	1,549	1,667	--	
Total Claims - Pregnant Smokers		103	107	134	80	66	22	
Total Claims - Family + General								
Practice Providers		909	1,376	1,450	1,053	1,547	1,377	
Total Claims - OB/GYN Providers		155	216	154	293	289	112	
Cost of Paid Claims			\$29,782	\$42,709	\$34,603	\$45,270	\$33,726	

*Annual total unique recipients unavailable until reconciled, unduplicated year-end data is available.

Pharmacotherapy

Historical Patterns

	2013	2014	2015	2016	2017	2018	2019	Trend
Total # Paid Claims	7,734	7,514	9,851	10,068	10,113	10,624	10,153	
Bupropion HCL	68	68	122	225	225	121	121	
Chantix	2,148	2,229	2,418	2,226	2,276	2,266	2,344	
NRT*	5,518	5,217	7,311	7,617	7,612	8,237	7,688	
Pregnant Smokers			1,477	1,354	1,302	1,377	2,057	