Smoking Cessation Leadership Center



University of California San Francisco

One-Hour Power Break Webinar: *The Building and Scaling of UC Quits: Health Systems Change for Tobacco Cessation with Electronic Medical Records*

Elisa K. Tong, MD, MA



Catherine Saucedo

Deputy Director

Smoking Cessation Leadership Center University of California, San Francisco catherine.saucedo@ucsf.edu



Smoking Cessation Leadership Center



University of California San Francisco



Disclosures

This UCSF CME activity was planned and developed to uphold academic standards to ensure balance, independence, objectivity, and scientific rigor; adhere to requirements to protect health information under the Health Insurance Portability and Accountability Act of 1996 (HIPAA); and include a mechanism to inform learners when unapproved or unlabeled uses of therapeutic products or agents are discussed or referenced.

The following faculty speakers, moderators, and planning committee members have disclosed they have no financial interest/arrangement or affiliation with any commercial companies who have provided products or services relating to their presentation(s) or commercial support for this continuing medical education activity:

Elisa K. Tong, MD, MA, Christine Cheng, Brian Clark, Jennifer Matekuare, Roxana Said, MPH, Catherine Saucedo, and Steven A. Schroeder, MD



Thank you to our funders



Robert Wood Johnson Foundation







Housekeeping

- All participants will be in **listen only mode**.
- Please make sure your speakers are on and adjust the volume accordingly.
- If you do not have speakers, please request the dial-in via the chat box.
- This webinar is being recorded and will be available on SCLC's website, along with the slides.
- Use the chat box to send questions at any time for the presenters.



CME/CEU Statement

Accreditation:

The University of California, San Francisco (UCSF) School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

UCSF designates this live activity for a maximum of *1.0 AMA PRA Category 1 CreditTM*. Physicians should claim only the credit commensurate with the extent of their participation in the webinar activity.

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New Behavioral Health Accreditation

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Elisa K. Tong, MD, MA Associate Professor

Department of Internal Medicine University of California, Davis





www.ucquits.com







Building and Scaling UC Quits: Health Systems Change for Tobacco Cessation with Electronic Medical Records

Elisa Tong, MD, MA Associate Professor of Internal Medicine, UC Davis Project Director, CA Quits

Objectives

Population-based Cessation

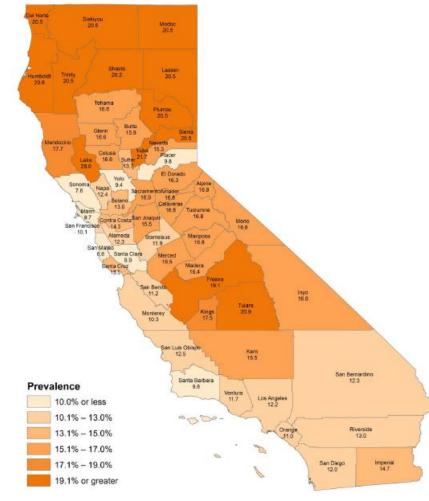


www.ucquits.com

Building UC Quits

Scaling UC Quits: CA Quits

Over 3 Million Smokers in California



CA prevalence: 11.6% (CHIS 2012-4)

Regional variation

Higher in subgroups (CHIS 2009)

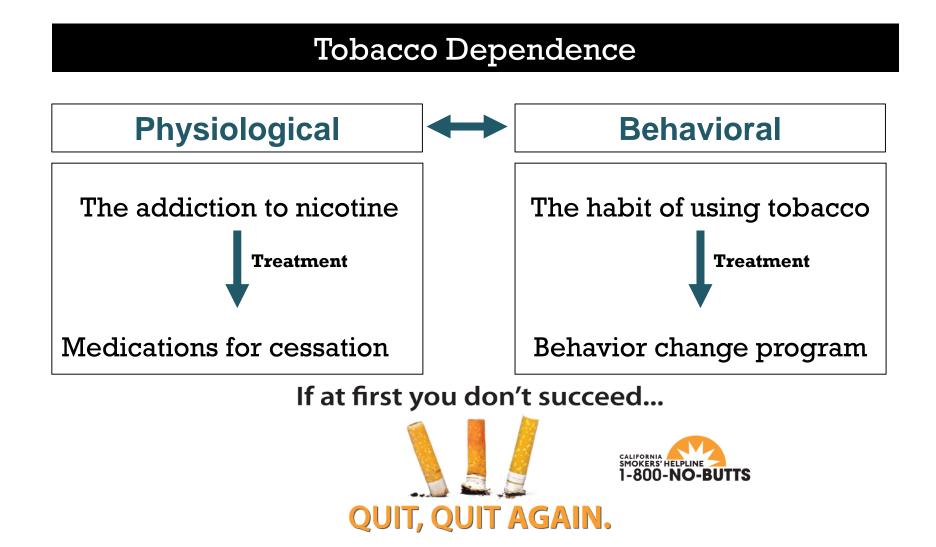
- Medi-Cal: 19.9%
- Low socioeconomic status white and African American: 24%
- American Indians, Asian men: 20-30%
- LGBT: 19%
- Mental health/alcohol/drug: 24%
- Cancer*: 16% (any), 22% (tob-rel)

Note: Respondents aged 18+ were asked to report current cigarette smoking behavior. Source: California Health Interview Survey, 2012–2014.

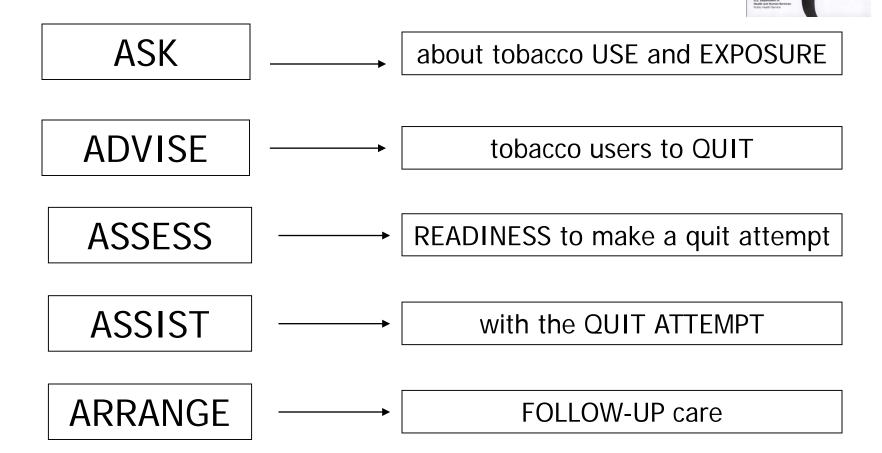
http://tobaccofreeca.com/wp-content/uploads/2016/10/2016-California-Tobacco-Facts-Figures.pdf;

* Among 29% CCR data available: http://bit.lv/CDOC CalltoAction

Tobacco Dependence: 2-part Problem



The 5 A's of Tobacco Treatment



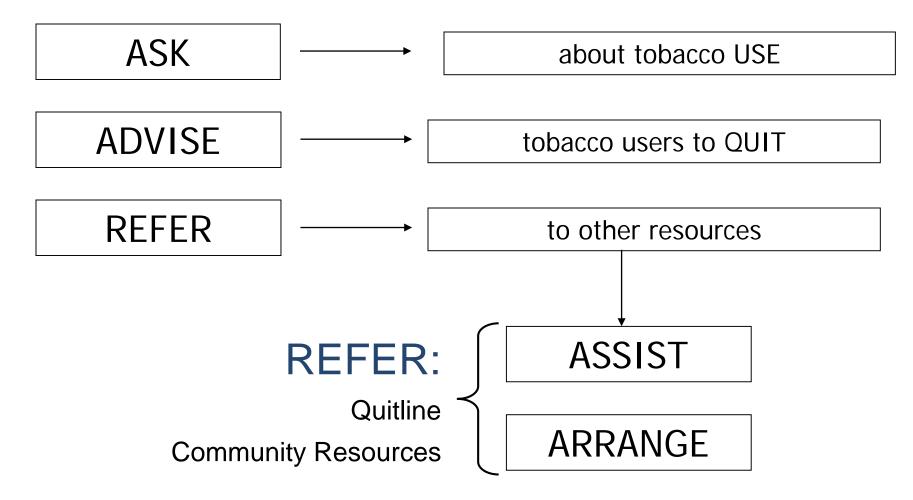
Treating

And

Tobacco Use

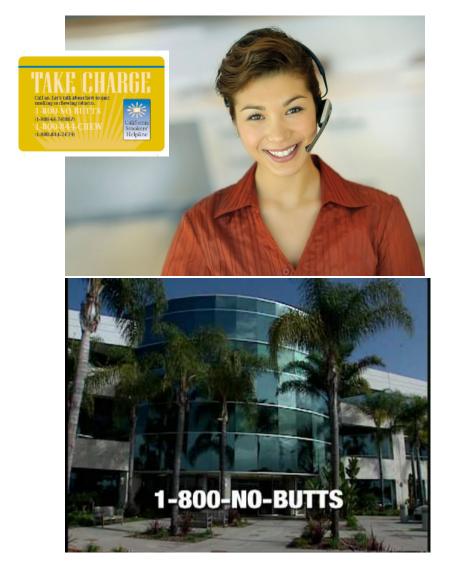
Dependence

Ask, Advise, Refer



California Smokers' Helpline





Free telephone counseling to develop a quit plan

- 25th year, based at UC San Diego
- Doubles chances of long-term quitting (*Zhu et al. NEJM 2002*)

Services:

- Self-help materials, local resources
- Up to six follow-up sessions
- Some free nicotine patch offers
- Languages: English, Spanish, Chinese, Korean, Vietnamese
- M-F 7am-9pm; Sat/Sun 9am-5pm

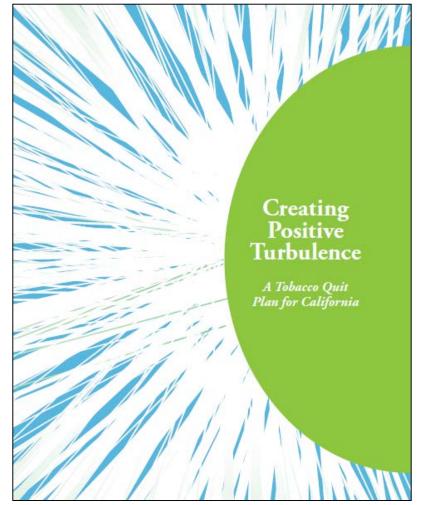
2009 California Summit: A Quit Plan

Social norm change model

"Promoting services that help smokers quit: marketing a statewide tobacco quitline and encouraging health care providers and other professionals to refer tobacco users to it"

Implementation plan

- Health care systems change
- Engage health care providers
- Engage other systems
 - Behavioral health, social service, employers



Roeseler A, Anderson CM, Hansen K, Arnold M, Zhu SH. 2010. Creating Positive Turbulence: A Tobacco Quit Plan for California. Sacramento, CA: California Department of Public Health, California Tobacco Control Program

Original Investigation

National survey of U.S. health professionals' smoking prevalence, cessation practices, and beliefs

Elisa K. Tong, M.D.,¹ Richard Strouse, B.A.,² John Hall, J.D., M.S.,³ Martha Kovac, M.P.H.,³ & Steven A. Schroeder, M.D.⁴

	Primary care physician (n = 437)	Emergency medicine $(n = 408)$	Psychiatry $(n = 400)$	Registered nurse (n = 388)
Ever ask if patient smokes ^{a,b}	427 (97.7)	406 (99.5)	382 (95.4)	339 (87.3)
Advises smokers to stop smoking*	405 (94.9)	331 (81.7)	305 (80.3)	222 (65.6)
Assesses smokers if interested in quitting*	361 (84.8)	158 (38.7)	276 (72.7)	175 (52.2)
Assists smokers to quit				
Sets quit date*	257 (63.7)	65 (16.4)	103 (28.9)	78 (24.5)
Refer cessation program*	203 (46.7)	107 (26.1)	161 (40.0)	132 (34.0)
Provides material with quitline information*	235 (54.5)	121 (29.1)	119 (30.0)	191 (49.4)
Discuss medication*	289 (68.5)	59 (14.5)	242 (63.8)	N/A ^c
Arranges follow-up*	98 (23.1)	5 (1.3)	76 (20.6)	27 (8.0)

Barriers to 5 A's

- Competing priorities
- Believing counseling not appropriate service
- Uncomfortable asking if smoke
- Not being a PCP
- Smoker
- *68% PCPs agree limited or no reimbursement

Facilitators of 5 A's

- Believing treatment important as a professional responsibility
- Awareness of PHS Guidelines
- Had cessation training

Health System Priority: Tobacco Assessment and Treatment

PLANS



Affordable Care Act (2010)

Cover tobacco cessation

DHHS, Labor, Treasury (2014)

- Cover 2 quit attempts/year with meds & counseling
- No cost sharing or prior auth

PROVIDERS



"Meaningful Use" (2009)

 Require Tobacco Status in electronic health records

Quality metrics (2012)

• Tobacco identification and counseling reporting in CA

Objectives

Population-based Cessation



www.ucquits.com

Building UC Quits

Scaling UC Quits: CA Quits

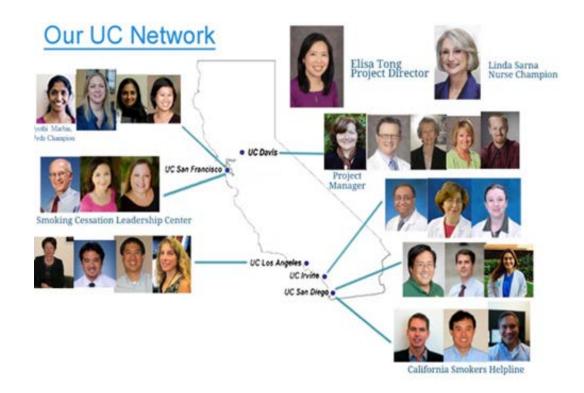
UC QUITS VISION To address tobacco cessation at every UC Health encounter

The UC Quits Network



Funding: UC Health's Center for Health Quality & Innovation (2014-2016), UC Office of the President

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Funding: UC Health's Center for Health Quality & Innovation (2014-2016), UC Office of the President

Engage All Providers

Nursing

- Documents tobacco status intake
- Assist nicotine withdrawal during hospital stay

Peds and obstetrics

Passive smoking and helping household smoker

Anesthesia and Surgery

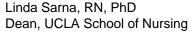
- Access to pre-op clinic, pain clinic, peri-op for surgical lines
- "There is no sweet spot to quit before surgery"

Psychiatry

Behavioral health has high smoking rates

Health Professional Team

• Pharmacists, Respiratory Therapists, Social Work





Jyothi Marbin, MD UCSF Benioff Oakland



Maxime Cannesson, MD Vice-Chair Peri-op Med UCLA Anesthesia



Lisa Kroon, PharmD Chair, UCSF Clinical Pharmacy



Tim Fong, MD UCLA Psychiatry



Aims of UC Quits

To build capacity through a UC-wide Tobacco Cessation Network



To create technological modifications to each UC EMR

- Yr 1: eReferral to California Smokers' Helpline
- Yr 2: Order sets and alerts

To conduct outreach and education across departments and nursing staff

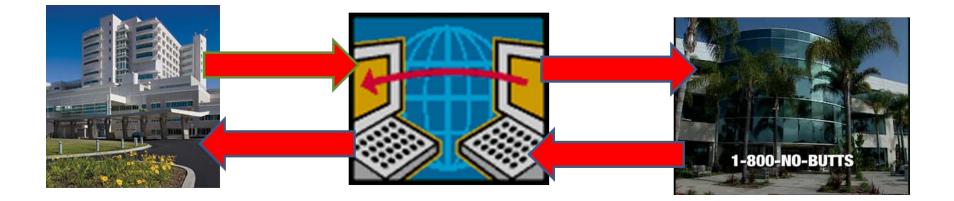
- UC Quits website resource
- UC Quits brief training modules





Two-way eReferral to Helpline: Helpline calls referred patient in 2 days

13x increased likelihood of patients connecting to quitline*



- 2013: UC Davis sets up California eReferral
- 2014-2015: "UC Quits" scale-up
- 2018: 10,000+ eReferrals

EMR modifications across UCs

	UCD	UCSF	UCLA	UCI	UCSD
eReferral to Helpline	Х	Х	Х	Х	Х
Outpatient order set	Х	Х	Х	Х	Х
Outpatient HM alert	Х			Х	
Outpatient class	Х	Х		X (pharm)	
Inpatient order set	Х	Х	Х	Х	Х
Inpatient alert/links	Х	RT report	Х	Х	Х
Inpatient education	Nursing Pharm (IM) RT (some)	RT (all)	Nursing, RT (Santa Monica)	Nursing	Nursing RT (some)



Tobacco is the leading cause of preventable death and disability.

University of California is taking action to address tobacco use and exposure at every UC clinical encounter. You can find tools on this site to help our patients be tobacco-free with improved efficiency at UC. The California Smokers' Helpline at UCSD offers free counseling and follow-up services, and each UC will be linked through the electronic medical record.

The UC Quits Network



CMECALIFORNIA

UC Quits' Brief Provider Training Webinars

Available for free CME/CEU credit for 3 years

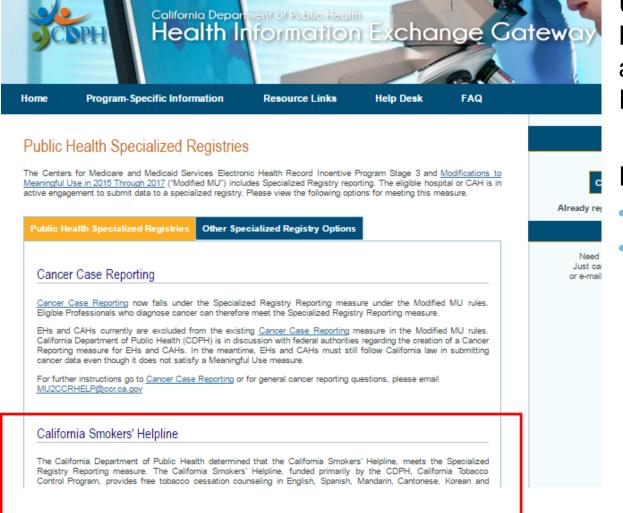
- YouTube links on <u>www.ucquits.com/training</u>
- CMECalifornia
- 15-30 minutes on topics by UC experts
 - Top 10 reasons to get your patient to quit smoking
 - The 5As
 - Overview of the California Smokers Helpline
 - Pharmacotherapy in Smoking Cessation
 - Addressing Secondhand Smoke Exposure
 - Smoking Cessation in the Perioperative Period
 - How Nurses at UC Can Address Tobacco

Full curriculum options: www.rxforchange.ucsf.edu





First Statewide Specialized Registry



UCI requested having Helpline eReferral for a MU Specialized Registry.

Potential for:

Tracking

• Re-engagement

Sustainability in Quality: Tobacco Assessment and Treatment

CLINICS

PUBLIC HOSPITAL INCENTIVES AND REDESIGN IN MEDI-CAL (PRIME)

PRIME Domains and Projects

Domain 1: Outpatient Delivery System Transformation and Prevention

These projects emphasize preventive services and the early diagnosis and treatment of illnesses. Domain 1 projects also encourage empowering patients and equipping them with additional tools through access to behavioral health care, social supports, and other well-being needs.

Required for PHS:

- Integration of Physical and Behavioral Health
- Ambulatory Care Redesign: Primary Care
- Ambulatory Care Redesign: Specialty Care

PHS must also select at least one other Domain 1 project from the list below:

- Patient Safety in the Ambulatory Setting
- Million Hearts[®] Initiative²
- Cancer Screening and Follow-up
- Obesity Prevention and Healthier Foods Initiative

HOSPITALS



Tobacco Treatment National Hospital Inpatient Quality Measures

Set Measure ID #	Measure Short Name
TOB-1	Tobacco Use Screening
TOB-2	Tobacco Use Treatment Provided or Offered
TOB-2a	Tobacco Use Treatment
TOB-3	Tobacco Use Treatment Provided or Offered at Discharge
TOB-3a	Tobacco Use Treatment at Discharge
TOB-4	Tobacco Use: Assessing Status After Discharge



California Department of Public Health

4 UC Inpatient Psychiatric Hospitals









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CMS.gov		Learn about your health care options			type search term here	Search	
		edicaid Services					
Medicare	Medicaid/CHIP	Medicare-Medicaid Coordination	Private Insurance	Innovation Center	Regulations & Guidance	Research, Statistics, Data & Systems	Outreach & Education
	room > Media Release lities Proposed Rule (CN	Database > Fact sheets > 20 IS 1690-P)	18 Fact sheets iter	ms > IPF Fiscal Ye	ear (FY) 2019 Medicare	Payment and Quality Reporting	Updates for Inpatient
Fact sheets		IPF Fiscal Year	(FY) 2019 I atient Psy	Medicare F	Payment and C	Quality Reporting sed Rule (CMS 16	90-P)

Inpatient Psychiatric Facility Quality Reporting

The IPFQR Program is a pay-for-reporting program established by the Affordable Care Act. For FY 2019, CMS recommends the removal of 8 Inpatient Psychiatric Facility Quality Reporting Program measures beginning with the FY 2020 payment determination, and continuing for subsequent years.

Measi	ure Name	Removal Rationale	
	Chart Abstra	cted Measures	
ļ	Alcohol Use Screening, SUB-1 (NQF #1661)	Costs associated with the measure outweigh the benefit of its continued use in the program	
	Tobacco Use Screening, TOB-1 (NQF #1651)	Measure performance among IPFs is so high and unvarying that meaningful distinctions and improvements in performance can no longer be made ("topped-out")	
	Tobacco Use Treatment Provided or Offered at Discharge and Tobacco Use Treatment at Discharge, TOB-3 and TOB-3a, (NQF #1656)	Costs associated with the measure outweigh the benefit of its continued use in the program	

Submission comment deadline: 6/26/18

www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2018-Fact-sheets-items/2018-04-27-2.html

Objectives

Population-based Cessation



www.ucquits.com

Building UC Quits

Scaling UC Quits: CA Quits







CA QUITS

aims to change the way health professionals address smoking with their patients

Tobacco is the #1 preventable cause of death and disability.

> Every smoker. Every encounter.

CA QUITS

THE INITIATIVE

CA Quits is a tobacco cessation learning collaborative for hospitals participating in the California Department of Health Care Services' Public Hospital Redesign and Incentives in the Medi-Cal (PRIME) program.

This learning collaborative is funded by the California Tobacco Control Program and builds off of the UC Quits project connecting the 5 UC health systems with the California Smokers' Helpline at UC San Diego through bi-directional e-referrals for smoking cessation.

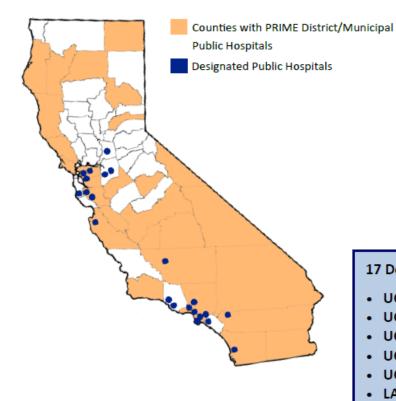
CA QUITS PARTNERS

California Tobacco Control Program (CTCP), UC Davis, Smoking Cessation Leadership Center at UC San Francisco, California Smokers' Helpline, California Department of Healthcare Services.

For more information, please contact Cynthia Vela at Cynthia.Vela@dhcs.ca.gov

Public Hospital Redesign & Incentives in Medi-Cal (PRIME): Medicaid 1115 waiver

WHO IS PARTICIPATING IN PRIME? 54 California Public Hospitals reporting on tobacco quality metric



20 District/Municipal Hospitals Reporting on Tobacco

- Coalinga Regional Medical Center
- Eastern Plumas Health Care
- El Camino Hospital
- El Centro Regional Medical Center
- Healdsburg District Hospital
- John C. Fremont Health Care District
- Kaweh Delta Health Care District
- Kern Valley Healthcare District
- Lompoc Valley Medical Center
- Mammoth Hospital

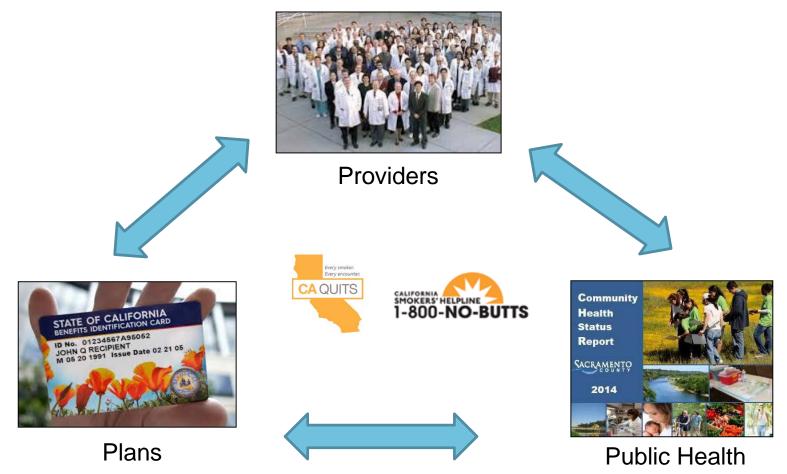
- Mayers Memorial Hospital District
- Modoc Medical Center
- Oak Valley Hospital District
- Palo Verde Hospital
- Palomar Medical Center
- Salinas Valley Memorial Healthcare System
- Southern Inyo Hospital
- Tahoe Forest Hospital District
- Tri City Medical Center
- Tulare Regional Medical Center

17 Designated Public Hospitals

- UC Davis
- UC San Francisco
- UC Los Angeles
- UC Irvine
- UC San Diego
- LA Dept of Health Services
- Alameda Health System
- Arrowhead Regional
- Contra Costa Regional

- Kern Medical Ctr
- Natividad Medical Ctr
- Riverside Univ Health System
- San Francisco General Hospital
- San Joaquin General Hospital
- San Mateo Medical Ctr
- Santa Clara Valley Medical Ctr
- Ventura County Medical Ctr

Vision for CA Quits: Partnerships for Population-based Cessation





Providers: UCD Comprehensive Cancer Center

Modoc 20.5

20.5

In Luis Obisor

Note: Respondents aged 18+ were asked to report current cigarette smoking behavior.

Prevalence

10.0% or less

10.1% - 13.0% 13.1% - 15.0%

15.1% - 17.0% 17.1% - 19.0%

19.1% or greater

Source: California Health Interview Survey, 2012-2014.

Sente Barbara

Inyo 16.8

San Bernardino

foverside 13.0

> Impenal 14.7

Kem 15.5

Los Angeles



- Serves local and regional population with higher tobacco prevalence
- Needs integrated tobacco treatment given historical system barriers

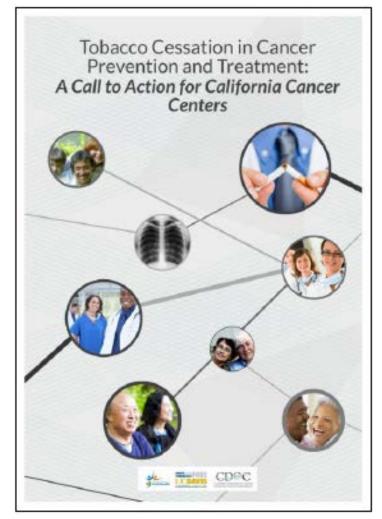
Future Provider Affinity Group: California Cancer Centers

Call to Action for ~100 CA cancer centers

- California Comprehensive Cancer Control Program
- Tobacco Stakeholder Group (coalition of California Dialogue on Cancer

Highlights gaps in service and tobacco treatment opportunities

Lung cancer screening



http://bit.ly/CDOC_CalltoAction



Health Plans:

California's Medicaid (Medi-Cal)



Medi-Cal Incentives to Quit Smoking project (2011-2016)

Funded by Centers for Medicare and Medicaid Services' Innovation Center



Health Plans:

27 Medi-Cal Managed Care Plans



www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2016/APL16-014.pdf



California's All-Plan Policy Letter: Comprehensive Tobacco Treatment

- 1) Initial and annual assessment of tobacco use for each adolescent and adult beneficiary
- 2) Cover FDA-approved tobacco cessation medications (for non-pregnant adults of any age)
- 3) Individual, group, and telephone counseling for beneficiaries of any age who use tobacco products
- 4) Services for pregnant tobacco users
- 5) Prevention of tobacco use in children and adolescents
- 6) Provider training
- 7) Identifying tobacco users by Managed Care Plan providers
- 8) Tracking treatment utilization of tobacco users

www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2016/APL16-014.pdf

Public Health: Local Lead Agencies

	REE SERVICES FREE MATERIALS FREE TRAINING ABOUT US
1-800-NO-BUTTS	SIGN UP FOR: Telephone Counseling Texting Program Provider Referral
Tobacco Users	a second and second and second
Friends and Family	100 0 00 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Health Care Providers	A Start Walk Start
Behavioral Health Professionals	
Community Partners	
Special Projects	C san Francisco france adamandar pricetter adam
Additional Resources	Los Angeles the former for the former
	Help Quitting Smoking
	County Cessation Program Listings
	Local Resources

- Every county has a Local Lead Agency for tobacco
- Population-based cessation in some counties' Scope of Work
- Listing of cessation classes in county www.nobutts.org/county-listing

Population Partnership in Progress: Los Angeles County

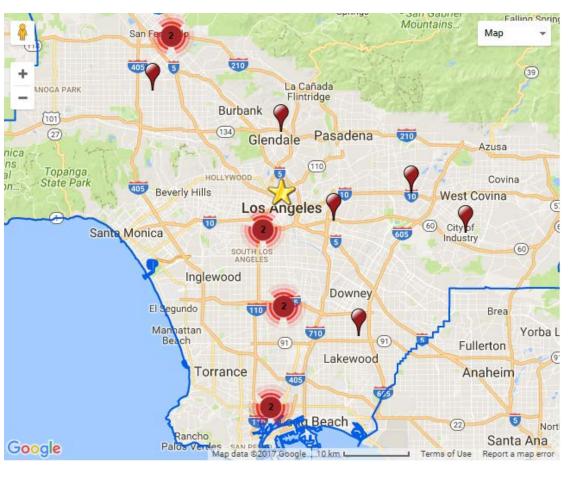
LA DHS 2nd largest public health system

- 19 LA DHS clinics
- 200+ Community Clinics

"eConsult" system for PCP - specialist communication.
Helpline now a specialist.
→ 700+ eConsult referrals to Helpline!

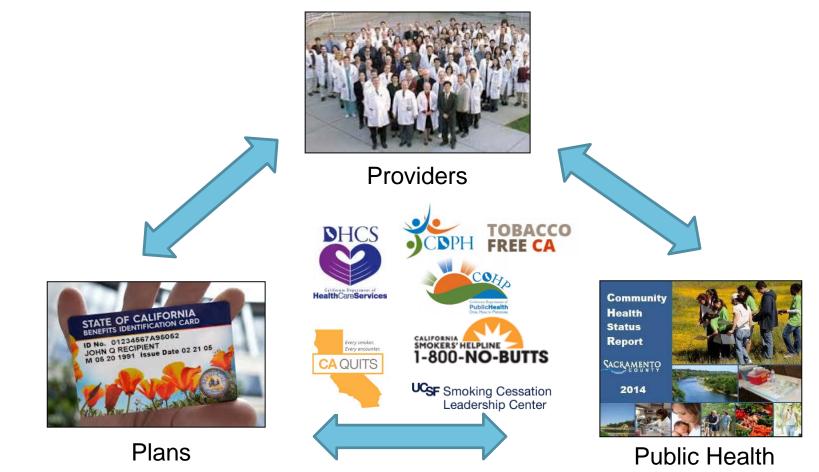
External Advisory Board:





Funding: Tobacco-Related Disease Research Program 25CP-0003 (PIs: E Tong and Hal Yee)

Future Goal: Coordination across Health Professions



Providers: California Pharmacists

PHARMACISTS:

Furnishing Nicotine Replacement Therapy for Smoking Cessation



California law (Senate Bill 493, effective 1/25/2016) allows pharmacists to provide nicotine replacement therapy (NRT) products without a physician's prescription.¹ This regulation was

Summary

1) California Smokers' Helpline is the state's resource for populationbased cessation

2) Health systems change has prioritized tobacco for individual & population health

3) UC Quits to CA Quits: Tobacco treatment as quality care and health partnerships



Home > Medicaid > Section 1115 Demonstrations

Section 1115 Demonstrations





• Submit questions via the chat box







Post Webinar Information

- You will receive the webinar recording, presentation slides, information on certificates of attendance, and other resources, in our follow-up email. All of this information will be posted to our website.
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American Association for Respiratory Care (AARC)



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- Instructions on how to claim credit will be included in our postwebinar email



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Upcoming SCLC Webinar

SCLC's next webinar coming in June, will be focused on the Department of Housing and Urban Development's (HUD) rule which mandates Public Housing Authorities to go tobacco-free. The webinar will highlight best-practices and free resources to help implement the rule and assist smokers who want to quit.

Registration is coming soon!



Contact us for technical assistance

- Visit us online at **smokingcessationleadership.ucsf.edu**
- Call us toll-free at **877-509-3786**
- Please complete the post-webinar survey





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