



NEW YORK STATE TOBACCO CONTROL PROGRAM AND MEDICAID PARTNERSHIP

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PARTNERSHIP AND COMMON OBJECTIVES

- NY Tobacco Control Program and Medicaid are both housed in the NYS Department of Health.
- Prevention Agenda Towards the Healthiest State
 - By the year 2013, reduce the prevalence of smoking in New Yorkers so that:
 - The percent of adults who smoke is no more than 12%
 - The percent of adolescents who smoked in the past month is no more than 12.0%

"Too many New Yorkers experience poor health as a result of obesity, tobacco use, and lack of preventive health services. The Prevention Agenda is a call to action to local health departments, health care providers, health plans, schools, employers, and businesses to collaborate at the community level to improve the health status of New Yorkers through increased emphasis on prevention."

- Richard F. Daines, M.D., State Health Commissioner



BENEFITS

○ Pharmacotherapy Benefit

- 1999 – coverage for prescription smoking cessation medications
- 2000 – coverage expanded to include over-the-counter medications
- Covered agents include nasal sprays, inhalers, Zyban (bupropion), Chantix (varenicline), over-the-counter nicotine patches and gum.
- Two courses of smoking cessation therapy per enrollee, per year are covered.
- A course of therapy is defined as no more than a 90-day supply (an original order and two refills, even if less than a 30-day supply is dispensed in any fill).



BENEFITS CONTINUED

- Smoking Cessation Counseling Reimbursement
 - 2009 – reimbursement of counseling for pregnant smokers
 - Reimbursement for services provided face-to-face by a physician, registered physician assistant, registered nurse practitioner, or licensed midwife during a medical visit. (No group sessions.)
 - Coverage includes up to six counseling sessions within any 12 continuous month period.
 - Reimbursement rates for
 - 3 to 10 minute sessions
 - 10+ minutes sessions



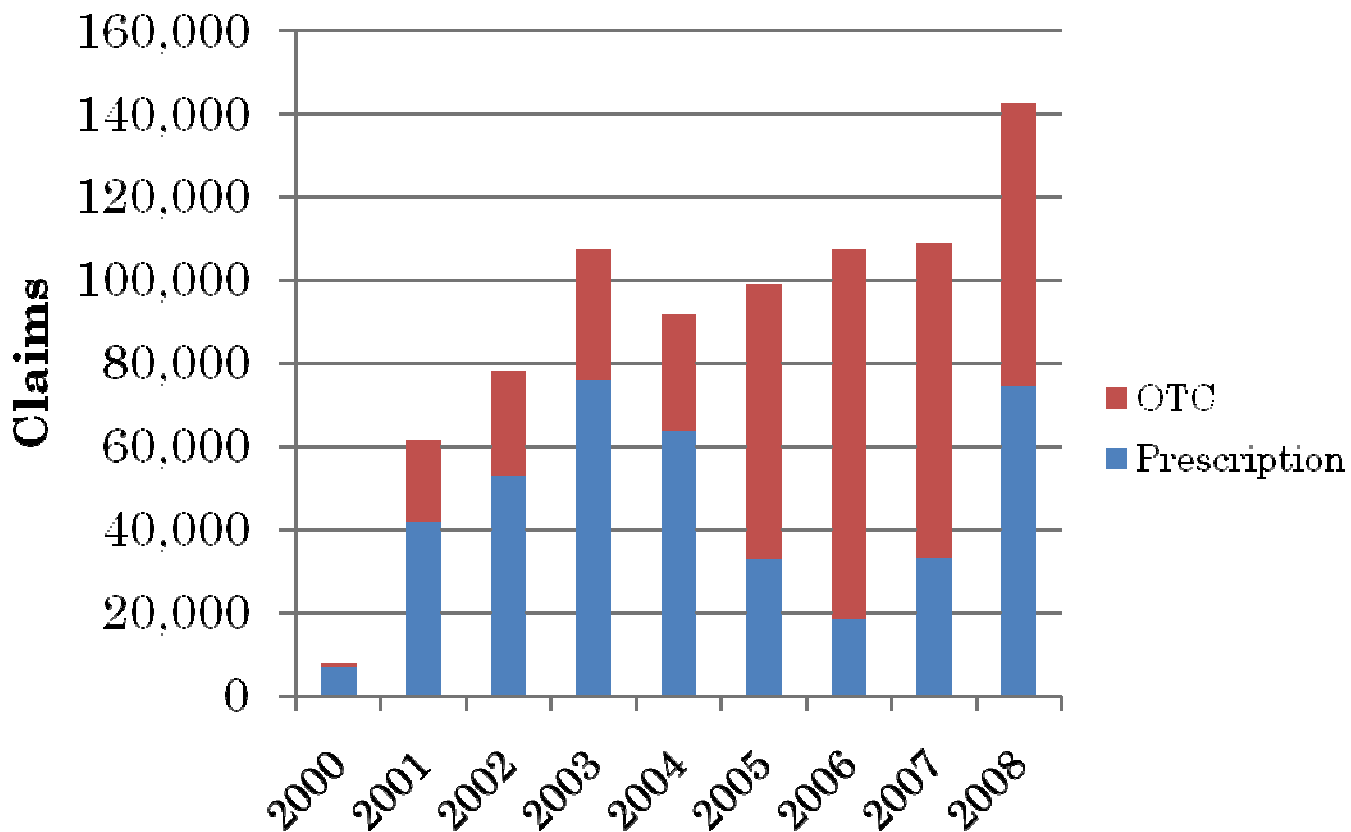
UTILIZATION

- With a strong pharmacotherapy benefit already in place, the TCP focus is on increasing utilization
 - Academic detailing through Cessation Centers
- Cessation Center work plans
 - **4A.** By June 30, 2010, increase from “X” to “Y” the number of Medicaid prescriptions and fiscal orders that are filled in the catchment area.
 - **5A.** By June 30, 2010 “X” clinicians in the catchment area will have accessed the Medicaid counseling benefit for pregnant women.
- Focus on health systems providing services to lower SES.



UTILIZATION CONTINUED

- Claims for Prescription and OTC smoking cessation products through NYS Medicaid



QUITLINE SERVICES

○ Demographics

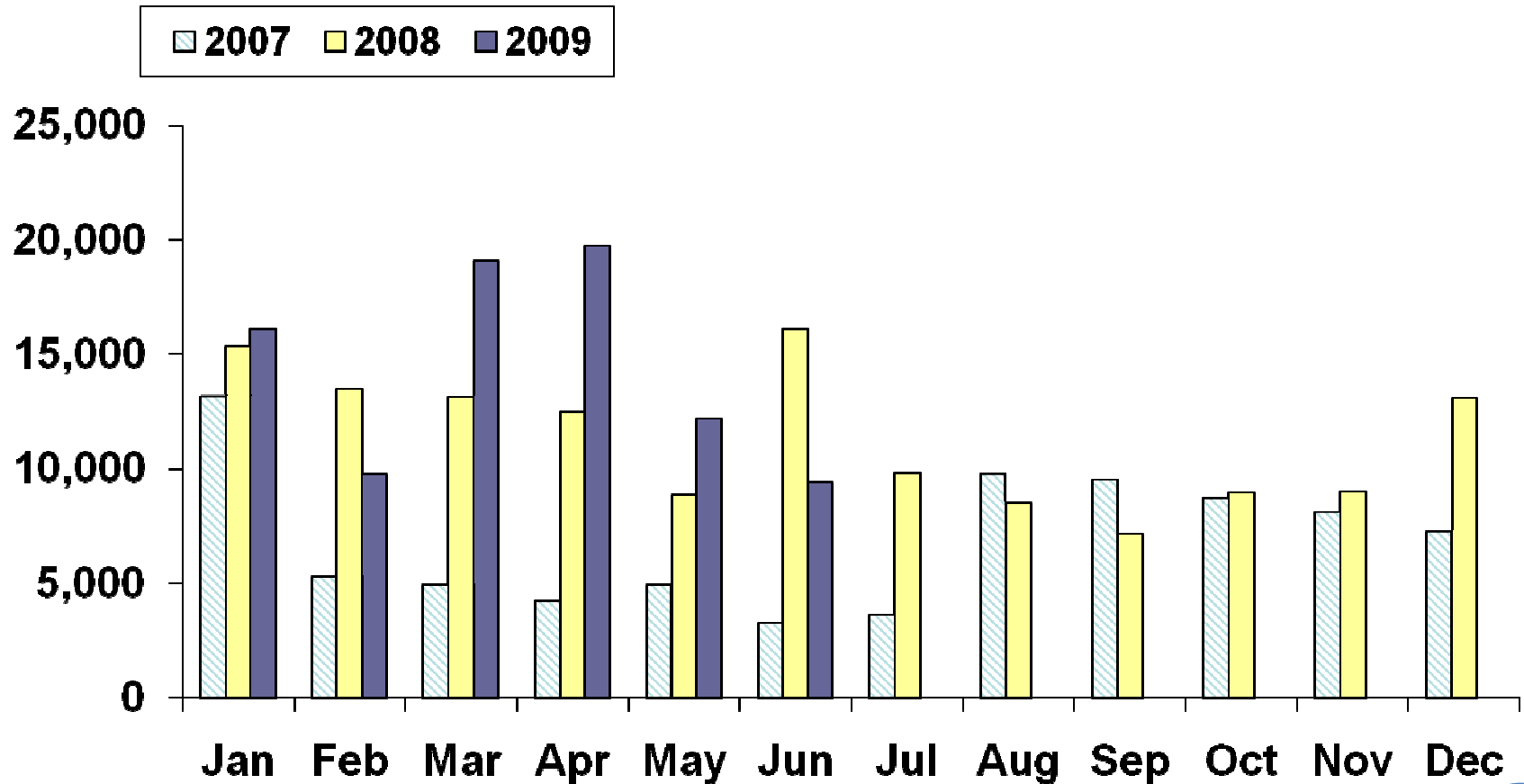
- Approximately 20% of QL clients are Medicaid-covered
- Approximately 30% are uninsured

○ Enhanced Services Program

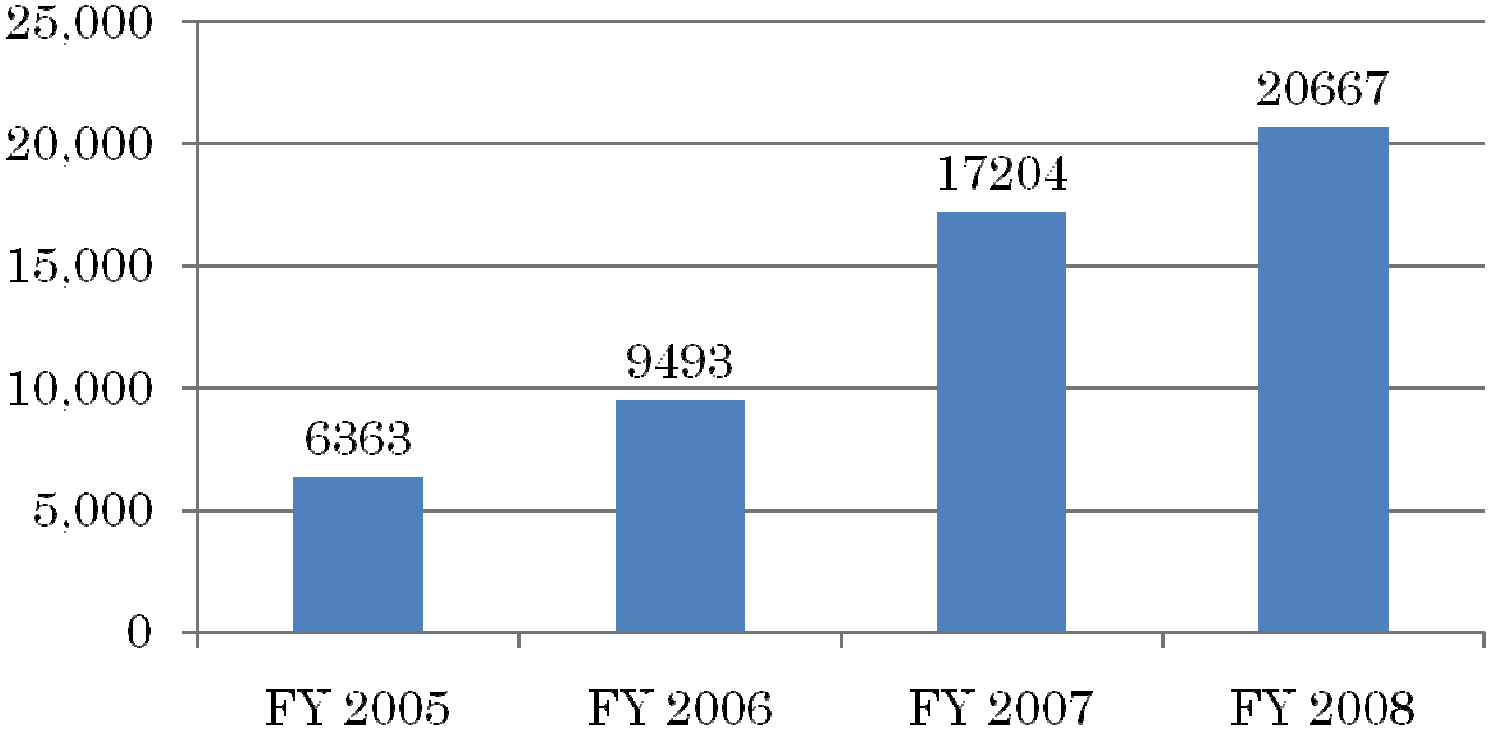
- All eligible Quitline callers receive a basic coaching protocol including 2 proactive callbacks and a 2-week NRT starter kit
- Self-reported Medicaid and Uninsured callers eligible for ESP
 - Additional proactive calls
 - Up to 4 additional weeks of NRT



QUITLINE NRT STARTER KITS DISTRIBUTED TELEPHONE AND ONLINE ORDERS



QUITLINE MEDICAID CLIENTS RECEIVING ADDITIONAL NRT



QUITLINE SERVICES CONTINUED

- Budget reductions and tremendous QL call volumes led the program to eliminate the Quitline Enhanced Service Program effective October 1st.
- Health Systems Change is viewed as the NYS Tobacco Control Program's primary cessation intervention
 - Focus on increased utilization of NY Medicaid's pharmacotherapy benefit
 - Focus on expanding NY Medicaid's smoking cessation counseling benefit to all tobacco users.
 - Focus on overall clinician engagement and health plan coverage.



QUALITY IMPROVEMENT

- Regular meetings with Office of Health Insurance Programs
- Data reviews
 - County-level utilization
 - Working with other agencies to review population-specific utilization (SPMI and substance abuse diagnoses)
- Policy Director to assist with TCP work with Medicaid to enhance current benefits.



THANK YOU

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