

2018 Cessation Report



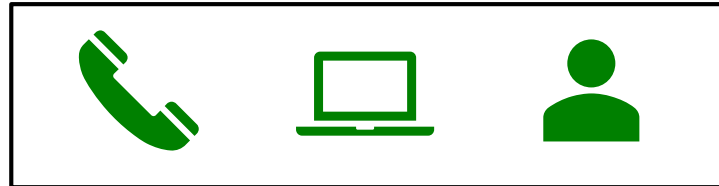
**YOU CAN QUIT.
WE CAN HELP.**



802Quits Benefits

- The 802Quits brand consists of three services to assist Vermonters with commercial tobacco cessation:
 - Quitline – Quit coaching over the phone and eight weeks of free dual nicotine replacement therapy (NRT), text message and email reminders
 - The Quitline offers specialized coaching and participation incentives for registrants who are pregnant. Starting in July 2018, a specialized program was put into place for Native Americans.
 - Quit Online – Online support, tools, text message, email reminders and two weeks of free NRT
 - Vermont Quit Partners (Quit in Person) – In-person coaching and eight weeks of free dual NRT

Summary: 2018 802Quits Stats at a Glance



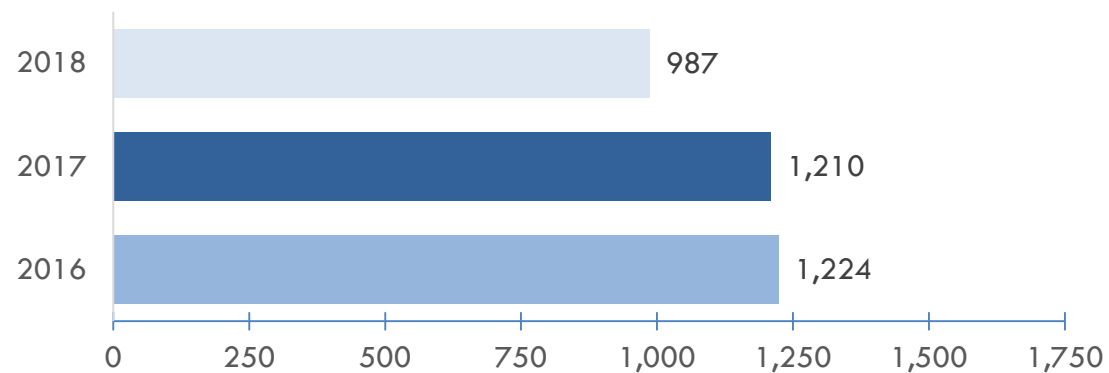
- Services Used: 3,307
 - ▣ Quitline Registrants: 987
 - ▣ Quit Online Registrants: 1,787
 - ▣ Quit In-Person Registrants: 533
- Total Fax Referrals: 426
 - ▣ Number one source of fax referral is healthcare professionals
- Top three ways that callers report hearing about the Quitline:
 - ▣ TV/Commercial
 - ▣ Health care provider
 - ▣ Family/Friend

Use of Cessation Services – Quitline and Quit Online

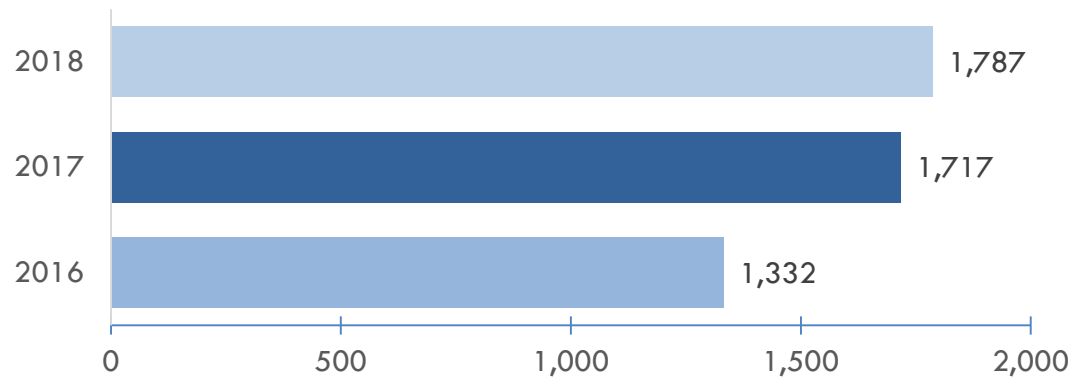
Registrants to the Quitline fell by 18% between 2017 and 2018.

Quitline registrants have been on the decline since 2014. Quit Online registrants have been increasing since 2016.

Quit by Phone Registrants, 2016-2018



Quit Online Registrants, 2016-2018



2018 Quitline Registrant Demographics

Gender	
Female	57%
Male	42%
Ethnicity	
Non-Hispanic	96%
Hispanic	2%
Race*	
White	94%
Black/African American	1%
Asian	1%
Hawaiian/Pacific Islander	0.1%
American Indian	4%
Other Race	2%

*Registrants can choose multiple races

Insurance	
Medicaid	26%
Medicare	22%
Blue Cross Blue Shield	14%
Uninsured	11%
All Other	28%
E-Cigarette Use	
Yes	10%
No	90%

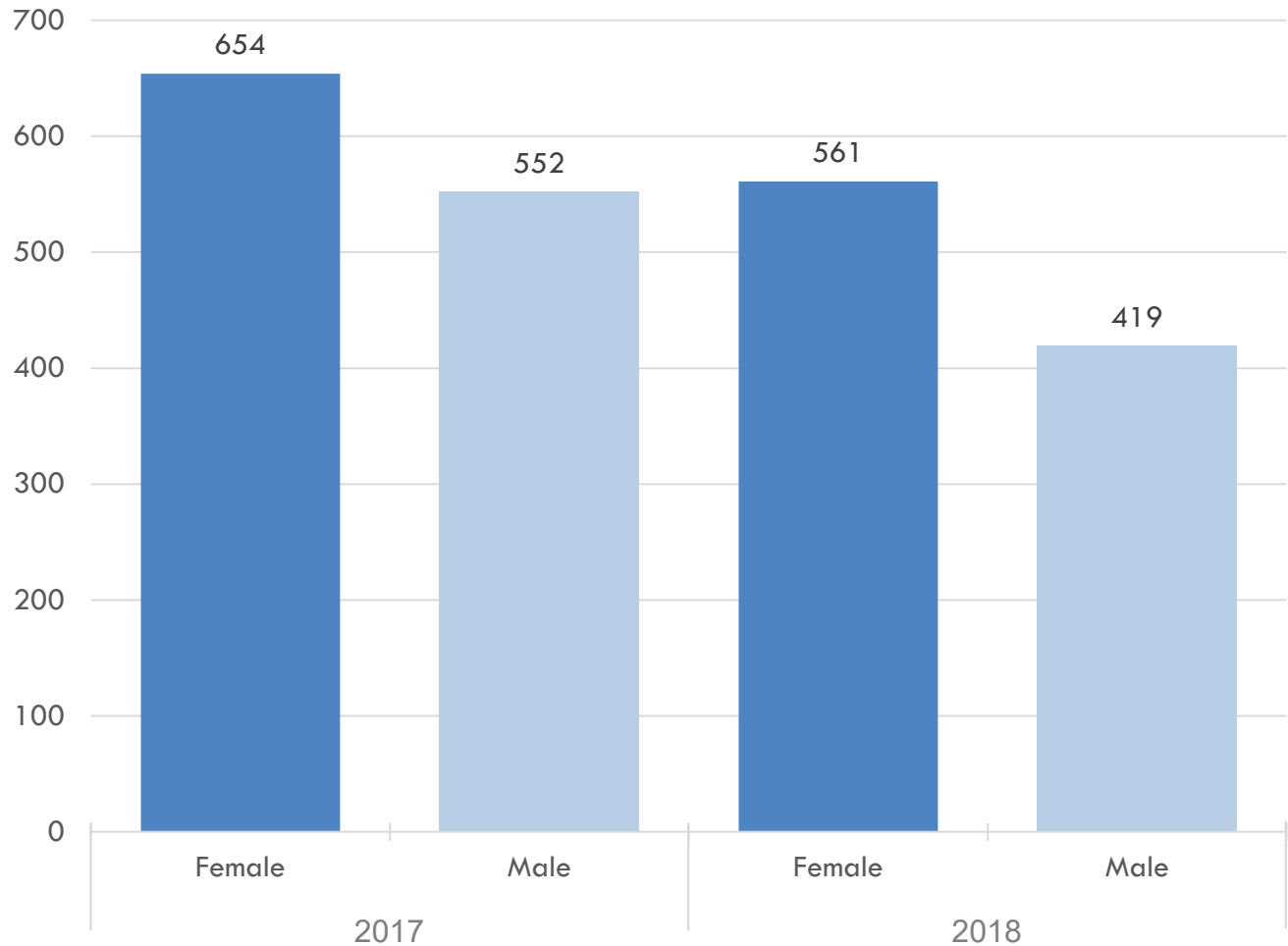
Age	
<18	0.3%
18 - 24	6%
25 - 44	36%
45 - 64	42%
≥ 65	15%
Chronic Conditions [^]	
COPD	19%
Asthma	19%
Diabetes	9%
Heart Disease	8%
Cancer	7%

[^]Percentage is out of people that filled out a medical history report (n=1133), not all registrants

Quitline Registrants by Gender 2017-2018

More registrants who identify as female compared to male sought services from the Quitline in 2017 and 2018.

This intake question does not capture non-binary callers.

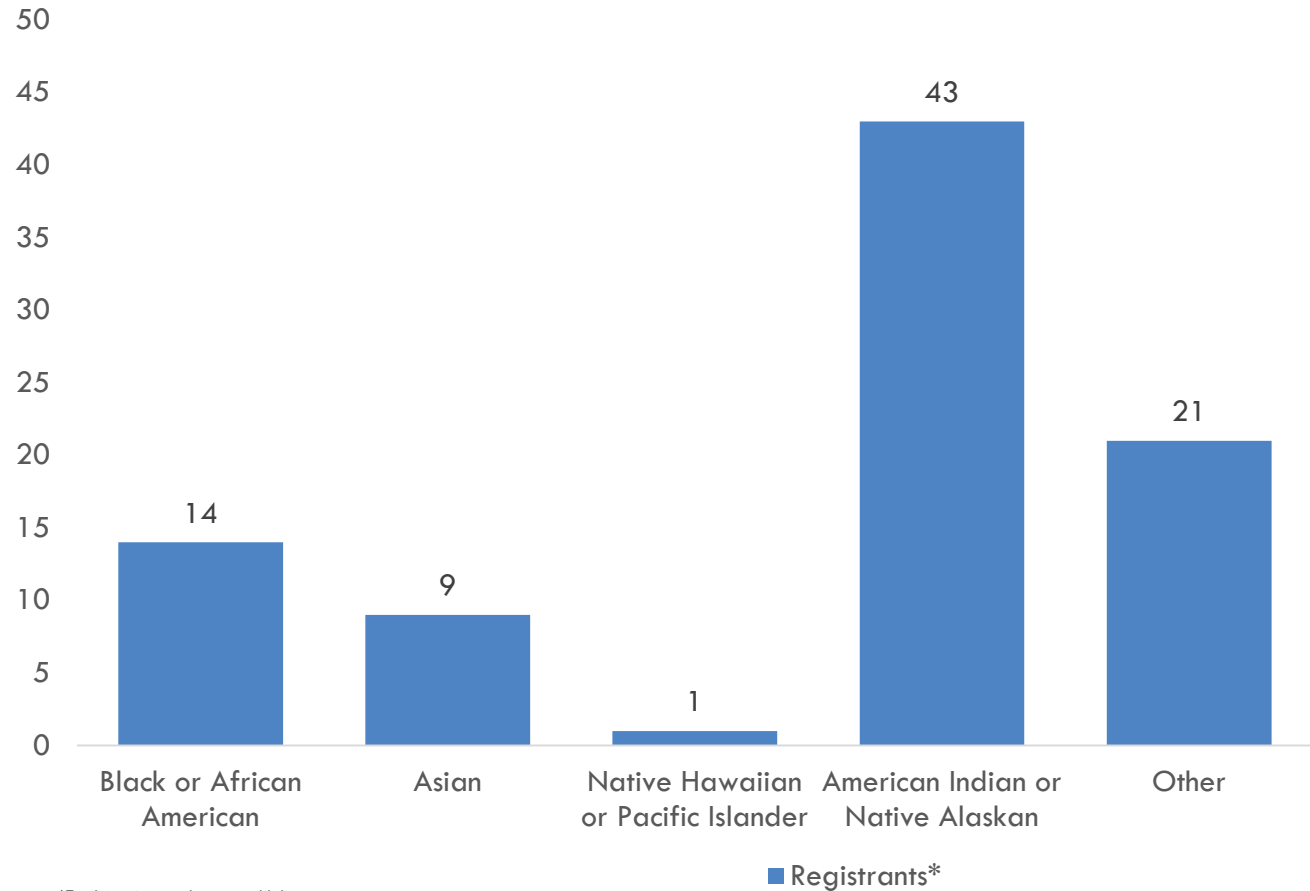


Registrants by Reported Race, 2018

The majority of registrants report their race as White (925 registrants).

The second largest reported race for 2018 was American Indian or Native Alaskan.

Of these registrants six (14%) reported Abenaki as their principal tribe.

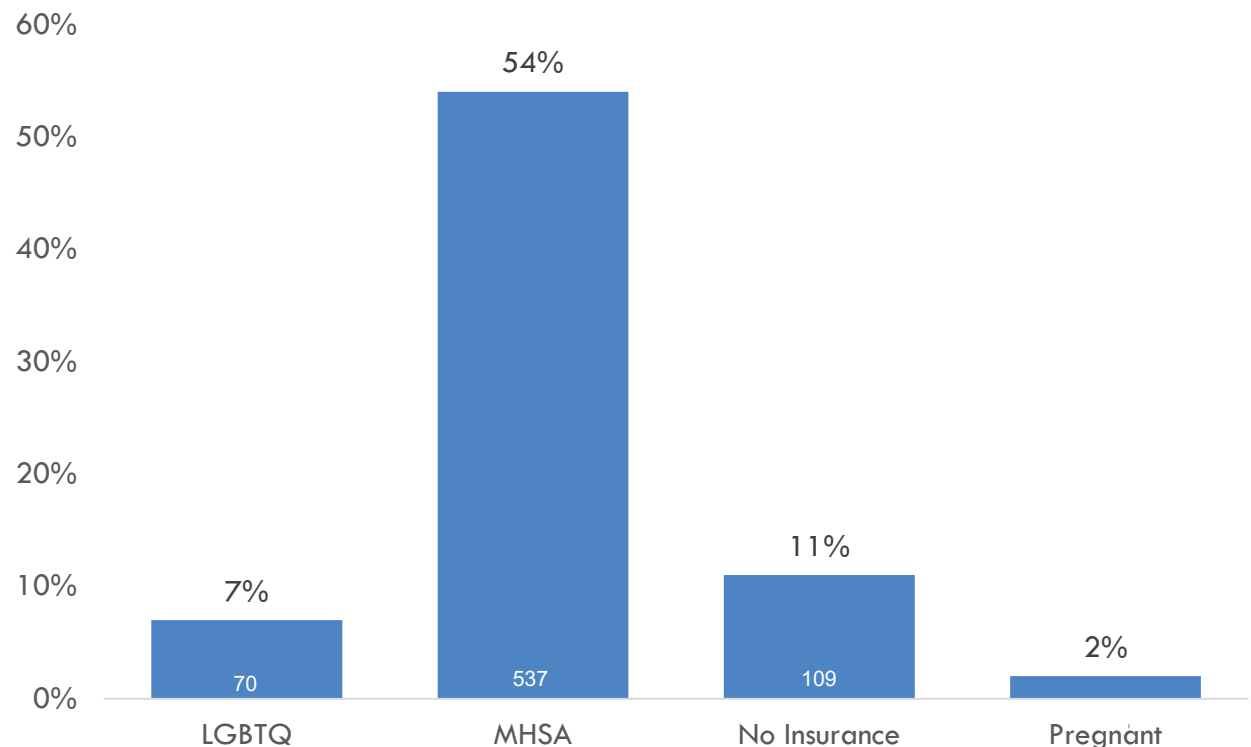


*Registrants can choose multiple races

Tobacco Control Program Priority Populations

In 2018, the program had specialized projects focused on people with low SES, LGBTQ, pregnant people and those who have mental health or substance use condition. Projects included grants with the Pride Center and 3 Free Clinics, and an incentive-based pilot for those who are pregnant.

% of Phone Registrants in Priority Populations



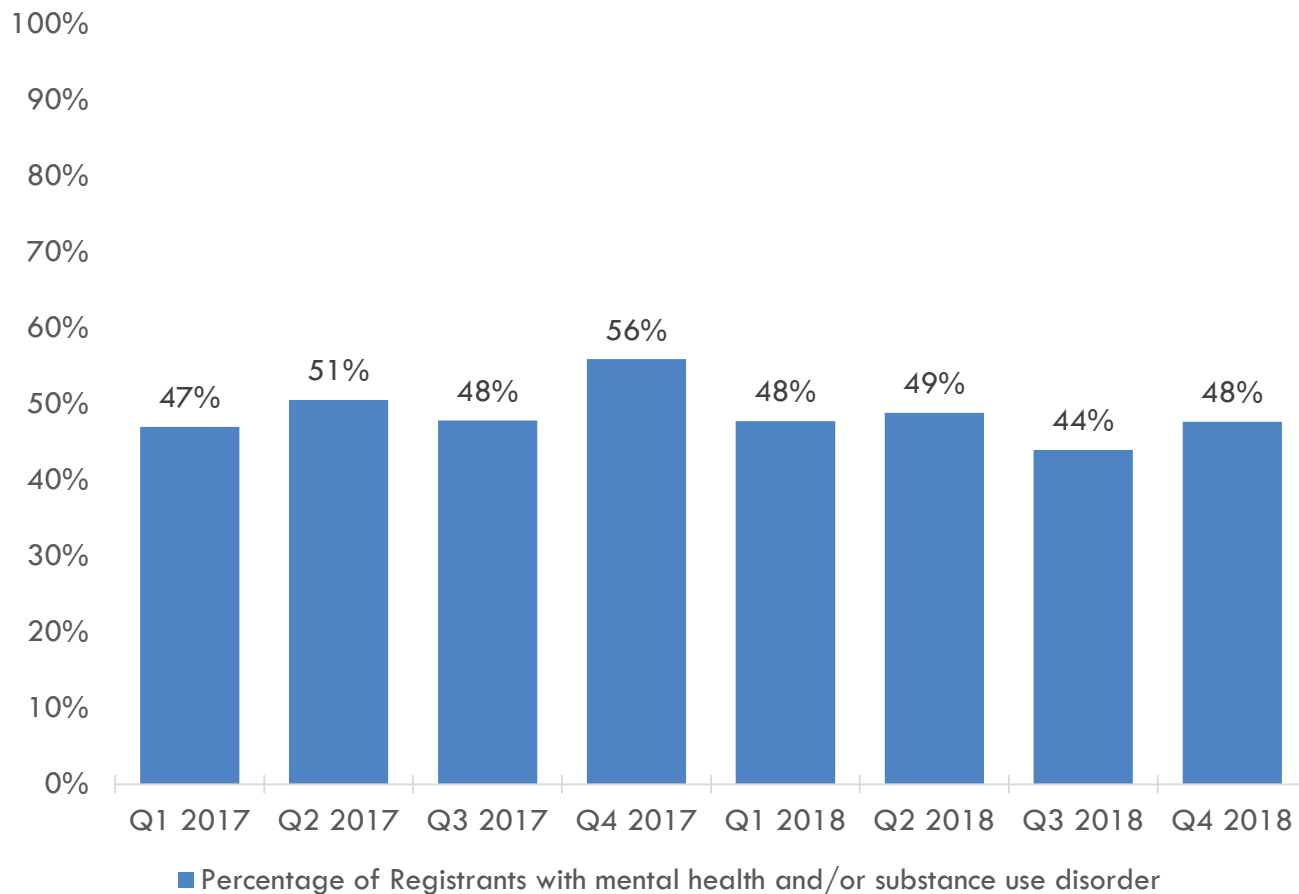
MHSA: People who identify as having a substance abuse or mental health condition make up half the registrants to the Quitline. Those who identify as having one of these conditions are significantly more likely to smoke than the general population.

Pregnancy: Although the amount of people who are pregnant that use 802Quits phone program is small (16), prevalence in this population is higher in VT than in other states

Mental Health or Substance Use Disorder – Quitline Registrants by Quarter 2017-2018

Approximately 50% of registrants to the Quitline report a mental health or substance use disorder.

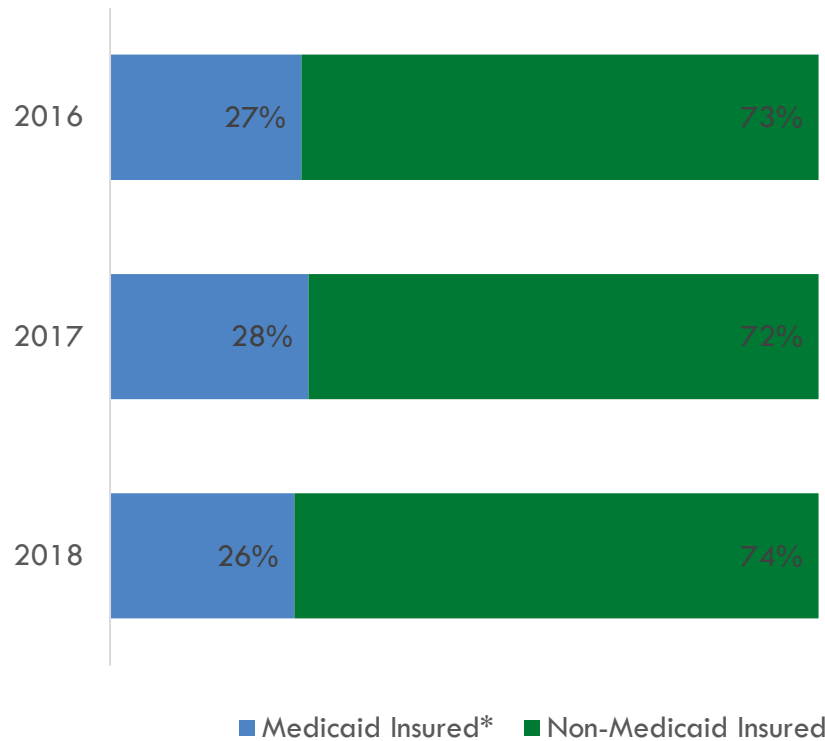
This percentage has remained consistent over the past two years.



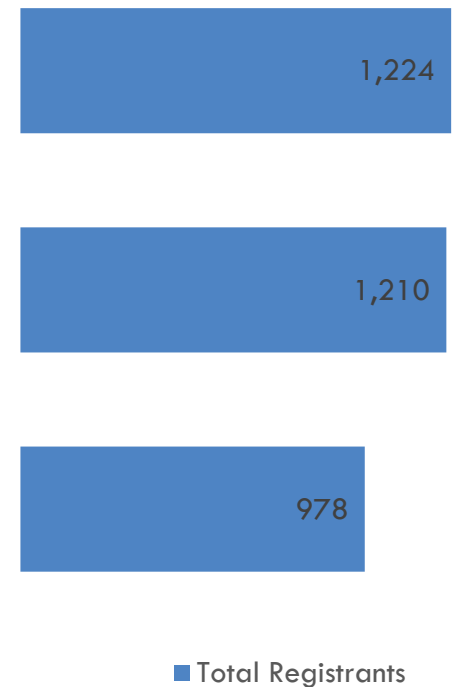
Quitline Registration – Medicaid Comparison

The number of Medicaid Quitline registrants decreased from 2017 to 2018.

Quitline Registrants 2016-2018



Total Registrants



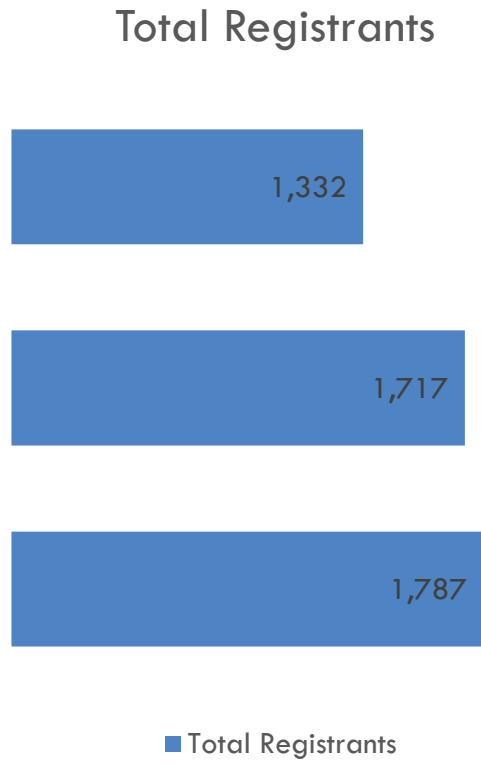
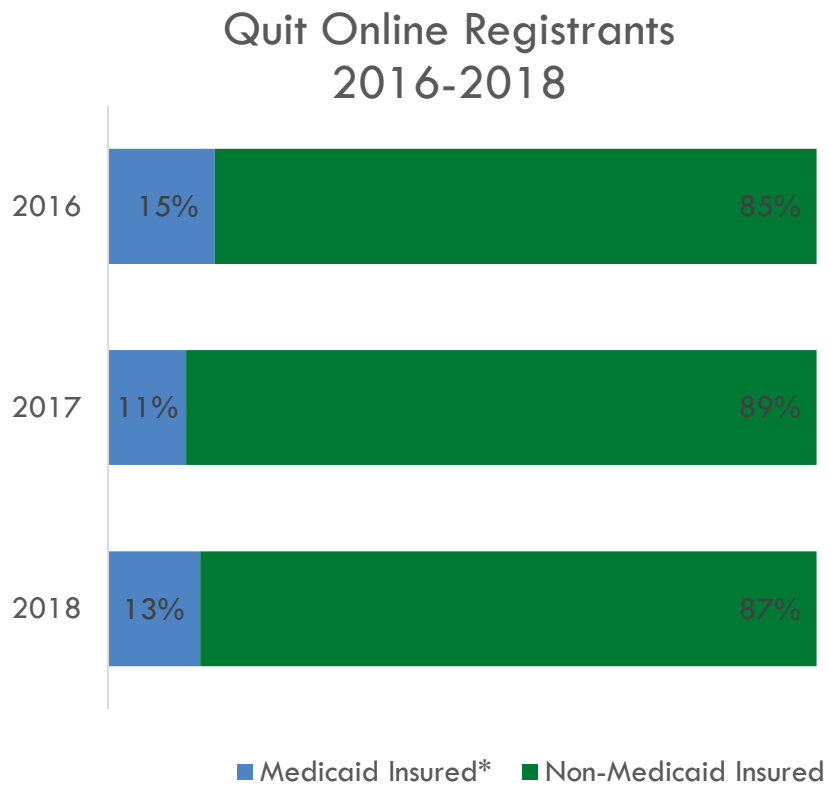
*Number of Medicaid-insured excludes registrants insured by both Medicaid and Medicare



Quit Online Registration – Medicaid Comparison

The number of Medicaid Quit Online registrants increased from 11% to 13%.

Reporting for this data changed in 2016. **Due to this, use caution when comparing 2016 and 2017 registrant numbers.**



*Number of Medicaid-insured excludes registrants insured by both Medicaid and Medicare

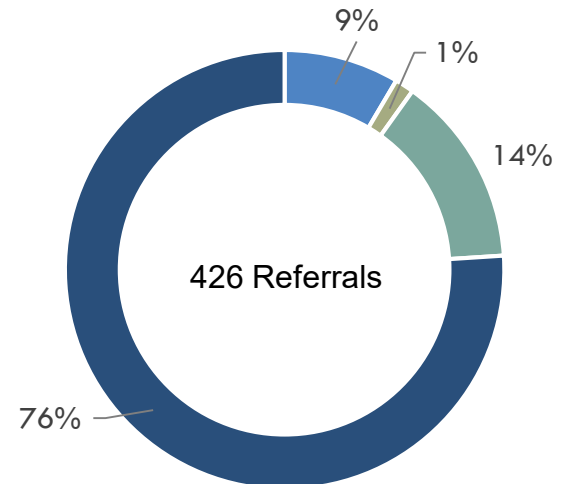
Quitline Fax Referral Activity

In 2018, there were a total of 426 referrals.

Most fax referrals in Vermont came from health care providers.

Quitline Fax Referral Outcomes, 2018

- Already Participating
- Declined
- Successful Referral
- Unreachable/Invalid



2017 578 Referrals

- 20% Successful Referrals
- 69% Unreachable/Invalid

2016 559 Referrals

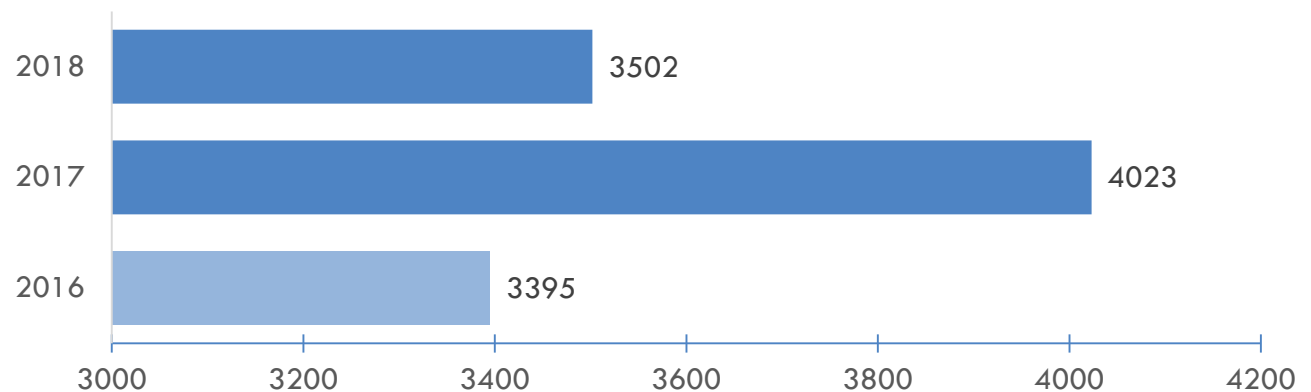
- 19% Successful Referrals
- 68% Unreachable/Invalid

Nicotine Replacement Therapy Orders (NRT)

Free NRT remains a strong driver for Vermonters to use 802Quits services. Dual nicotine offers both long- and short-acting NRT (e.g. patch and gum) to manage withdrawal symptoms.

In 2018, 3,502 orders were placed. While this is a 13% decrease from last year, the number is similar to 2016.

NRT Orders – Quitline & Quit Online 2016-2018

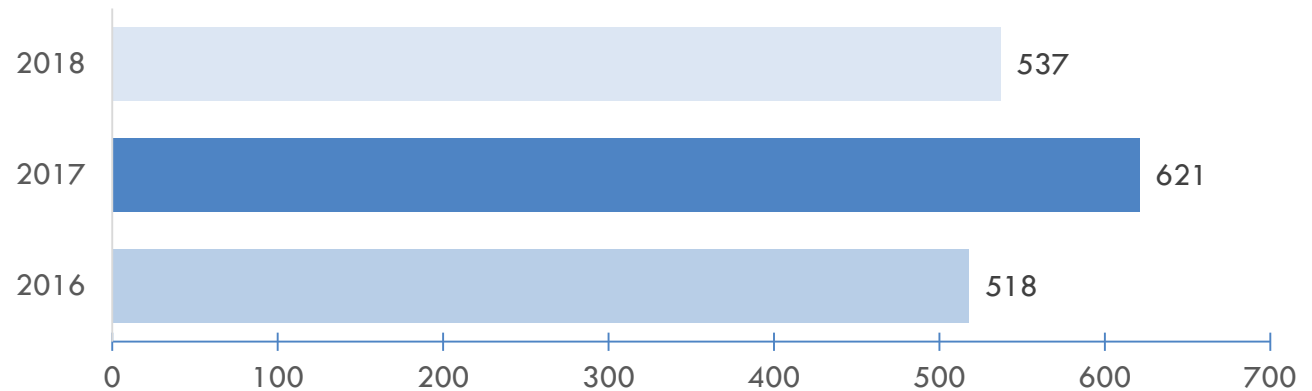


Nicotine Replacement Therapy Orders by Vermonters Insured by Medicaid

NRT orders for Medicaid insured registrants decreased from 2017 to 2018.

Note: These numbers are for the phone protocol only.

Medicaid NRT Orders – Qitline 2016-2018



*Number of Medicaid-insured excludes registrants insured by both Medicaid and Medicare

Outcomes

Responder quit rate refers to those who responded to the six-month follow up survey.

- Vermont's Quitline vendor, National Jewish Health, has one of the highest success rates in the country, with a 40% responder quit rate and a 90% participant satisfaction rate.

802Quits Vendors

- ❑ National Jewish Health is the vendor that manages Vermont's Quitline and Quit Online services and provides monthly data to the Health Department's Tobacco Control Program.
- ❑ Vermont Quit Partners and related data is managed by Blueprint for Health, a program within the Agency of Human Services.

Notes

- Data presented in this report is from National Jewish Health. The 2018 data was pulled from the online platform 2/15/2019.
- Contact Kristina Kiarsis at Kristina.Kiarsis@Vermont.gov with any questions.