2019 Cessation Report



YOU CAN QUIT. WE CAN HELP



Why 802Quits?

- Multiple studies have shown that the combination of counseling and medication result in a significant increase in quit success.
 - Short- and long-term interventions, with both counseling and NRT, are evidence-based approaches to quitting that have had great success.
- 802Quits provides several methods of counseling, as well as several types of NRT.
 - Registrants can use whichever counseling method they prefer, including multiple methods (online, phone calls, texting).
 - Registrants are also given two types of NRT to use in combination (patches, gum, lozenges).
- Medicaid covered registrants have access to name-brand NRT for up to 8 weeks.
 - Most Quitlines provide generic NRT.

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.
 - Specialized coaching and participation incentives for registrants who are pregnant.
 - Culturally-tailored program for Native Americans.
 - Starting in July 2020, "My Life, My Quit," a specialized program for youth.
 - Quit Online Online support, tools, text message, email reminders and up to four weeks of free NRT.
 - Vermont Quit Partners (Quit In Person) In-person coaching and eight weeks of free dual NRT.

2019 802Quits Stats at a Glance







- Services Provided: 4,540
 - Quitline Registrants: 1,041
 - Quit Online Registrants: 3,103
 - Quit In Person Registrants: 396
- Total Referrals: 280
 - Fax Referrals: 261
 - Voicemail Referrals: 3
 - Provider Web Referrals: 16
 - Number one source of fax referral is healthcare professionals.

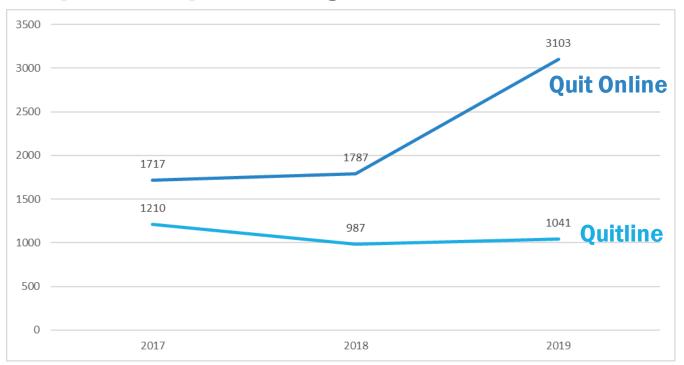
Quitline Reach

| How Registrants Heard of 802Quits | Registrants Responses |
|--|-----------------------|
| Brochure/Newsletter/Flyer/Newspaper | 57 |
| Community Organization | 14 |
| Digital ad | 5 |
| Doctor/Nurse/Healthcare Professional | 289 |
| Does not remember/Unknown/Refused | 10 |
| Employer/worksite | 8 |
| Family/Friend | 161 |
| Health Department | 16 |
| Other | 92 |
| Radio | 34 |
| TV/Commercial | 281 |
| TV/News | 9 |
| Website | 59 |
| Relative/Family/Friends | 2 |
| Health insurance | 3 |
| Ladies First Program (You First Program) | 1 |

In both 2018 and 2019, the top three ways that callers report hearing about the Quitline were Doctor/Nurse/Healthcare Professional, TV/Commercial, and Family/Friend.

Use of Cessation Services – Quitline and Quit Online

Quitline and Quit Online Registrants, 2017-2019



- Registrants to the Quitline increased by about 5% between 2018 and 2019. Registrants to Quit Online increased by more than 50% from 2018 to 2019.
- Quitline registrants have been on the decline since 2014.
- Quit Online registrants have been increasing since 2016.

2019 Quitline Registrant Demographics

| Gender | | |
|------------------------------|-------|--|
| Female | 53% | |
| Male | 47% | |
| Ethnicity | | |
| Non-Hispanic | 97.6% | |
| Hispanic | 1.9% | |
| Race* | | |
| White | 94.5% | |
| Black/African American | 1.2% | |
| Asian | 0.7% | |
| Hawaiian/Pacific Islander | 0.3% | |
| American Indian | 3.4% | |
| Other Race | 1.9% | |

| Insurance | |
|---------------------------|-------|
| Medicaid | 21.1% |
| Medicare | 25.6% |
| Blue Cross Blue Shield | 12.4% |
| Uninsured | 12.6% |
| All Other | 30.3% |
| E-Cigarette Use | |
| Yes | 11.5% |
| No | 88% |

| Age | |
|---------------------------------|------------------------|
| <18 | 0.3% |
| 18 - 24 | 5.5% |
| 25 - 44 | 30.9% |
| 45 - 64 | 46.4% |
| ≥ 65 | 16.9% |
| Chronic Conditions [^] | |
| Chronic Conditions | ^ |
| Chronic Conditions COPD | 12.3% |
| | |
| COPD | 12.3% |
| COPD Asthma | 12.3% 16.4% |
| COPD Asthma Diabetes | 12.3% 16.4% 5.6% |

^Percentage is out of people that filled out a medical history report (n=1041), **not** all registrants

- More males registered with 802Quits in 2019 than in 2018.
- More people ages 45 and older registered with 802Quits in 2019 than in 2018.
- Fewer registrants with 802Quits reported chronic conditions in 2019 than in 2018.

 $[*]Registrants\ can choose\ multiple\ races$

2019 Quitline Registrant Demographics Compared to 2018 BRFSS Demographics

| Race* | |
|------------------------------|-------|
| White | 94.5% |
| Black/African American | 1.2% |
| Asian | 0.7% |
| Hawaiian/Pacific Islander | 0.3% |
| American Indian | 3.4% |
| Other Race | 1.9% |

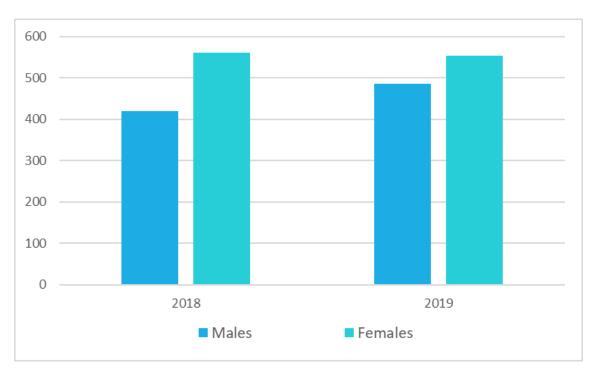
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|-------|
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| |

| Age | |
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| <18 | 0.3% |
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- Based on BRFSS data, more people of color use tobacco in Vermont (26%) than White people in Vermont (14%), however, significantly more White people use 802Quits than people of color.
- Most tobacco users in Vermont are ages 18-44 (36%) based on BRFSS data, however the majority of 802Quits registrants are ages 45 and older.
- ❖ BRFSS data shows that Vermonters have a smoking rate of ~15%, with American Indians in Vermonter have a smoking rate of nearly 45%, however only 3.4% of 802Quit registrants report as American Indian.
- Vermont tobacco users on Medicaid make up ~30% of tobacco users according to BRFSS data, while ~21% 802Quits registrants are Medicaid members.

^{*}Registrants can choose multiple races

Quitline Registrants by Gender 2018-2019



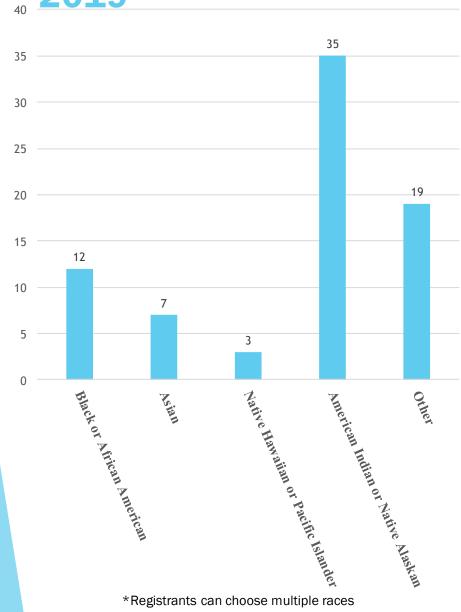




- As seen in 2018, more registrants who identify as female used the Quitline services in 2019 than registrants who identify as male.
- Approximately 15% more registrants who identify as male utilized the Quitline services in 2019 as compared to 2018.
 - This intake question does not capture non-binary callers.



Registrants by Reported Race, 2019



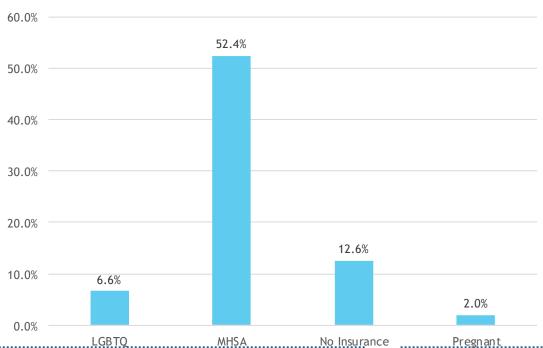
- Most of registrants report their race as White (975 registrants).
- The second largest reported race for 2019 was American Indian or Native Alaskan.
- Of these registrants 5

 (11%) reported Abenaki
 as their principal tribe.
- In 2020, the new youth protocol "My Life, My Quit" will be added to 802Quits Services.

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 conditions
- Since 2018, % of phone registrants in priority population has remained stable
- 2019 projects included grants with five Free Clinics, to better target uninsured populations, as well as new youth protocols for both Quitline and Quit Online

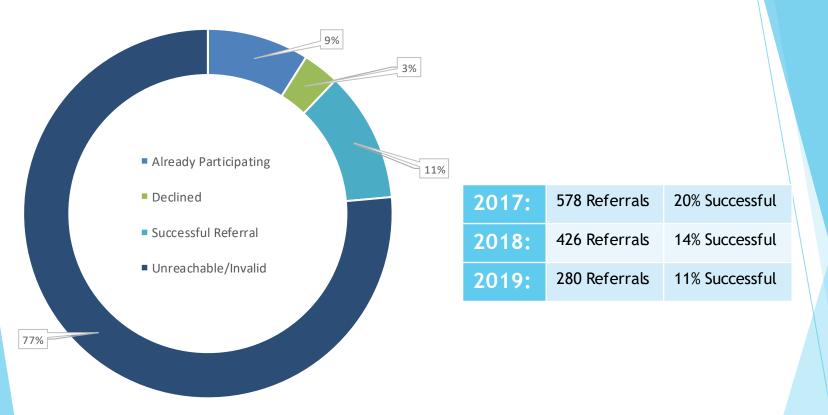




MHSA: People who identify as having a substance abuse or mental health condition make up half the registrants to the Quitline. Those who identify as having one of these conditions are significantly more likely to smoke than the general population.

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

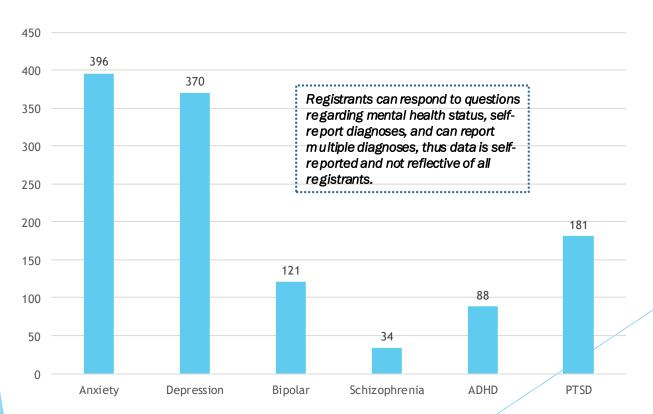
Quitline Fax Referral Activity



- In 2019, there were a total of 280 referrals, a 41.4% decrease from 2018.
 - Total number of referrals has been on the decline for several years.
- Most fax referrals in Vermont came from health care providers, with the other types of referrals being voicemail or web.
- Looking ahead, need to determine both why referral numbers are down, and how to increase total referrals.

Mental Health or Substance Use Disorder: Quitline Registrants 2019

- Depression and other mental health disorders in addition to substance use disorders are associated with higher smoking rates and health impacts caused by tobacco.
- Approximately 52% of registrants to the Quitline report a mental health or substance use disorder.
 - This percentage has remained consistent over the past three years.

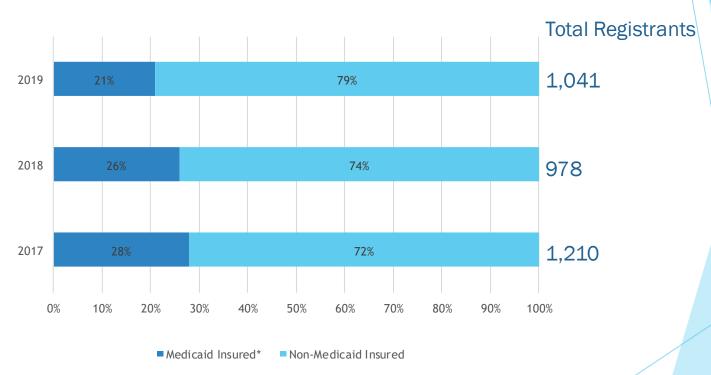




Quitline Registration - Medicaid Comparison

The number of Medicaid Quitline registrants decreased from 2017 to 2018, and continued to decrease into 2019, despite total registrants increasing from 2018 to 2019.

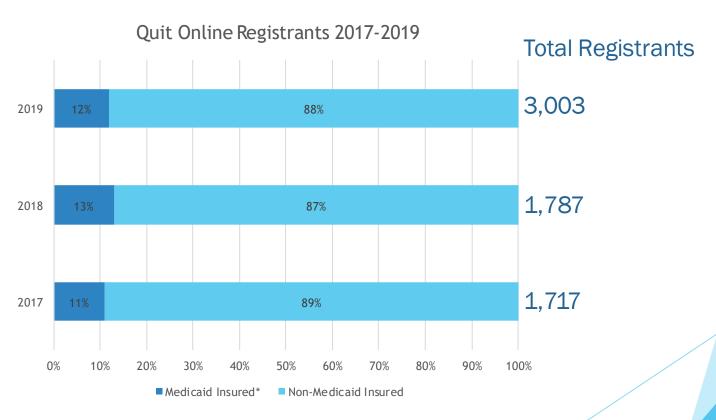




*Number of Medicaid-insured excludes registrants insured by both Medicaid and Medicare

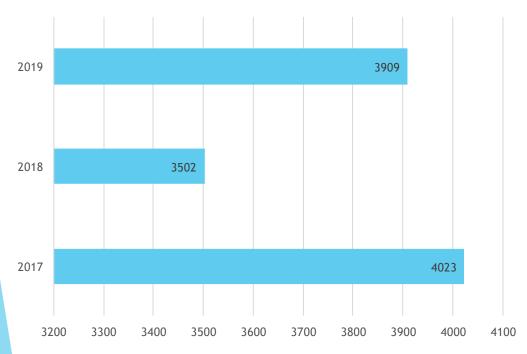
Quit Online Registration – Medicaid Comparison

The number of Quit Online registrants increased by more than 50% from 2018 to 2019! The proportion of Medicaid registrants has remained about 12% for several years.



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

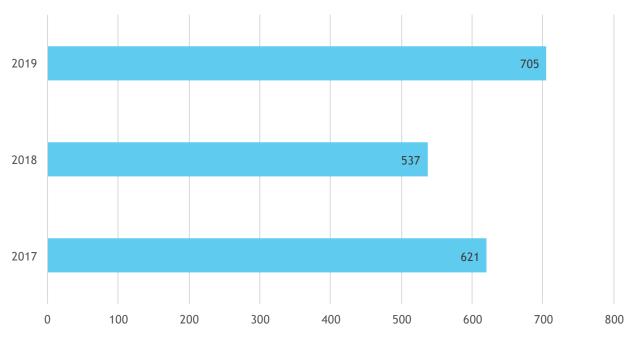
Nicotine Replacement Therapy Orders (NRT)





- Free NRT remains a strong driver for Vermonters to use 802Quits services. Dual treatment offers both long- and short-acting NRT (e.g. patch and gum) to manage withdrawal symptoms.
- In 2019, 3,909 orders were placed. This is ~11% increase from 2018.
 - Unclear why NRT orders were so much lower in 2018

Nicotine Replacement Therapy Orders by Vermonters Insured by Medicaid



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

- NRT orders for Medicaid insured registrants increased by 27% between 2018 and 2019.
- Note: These numbers are for the phone protocol only.

802Quits Vendor: NJH

- 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.
- 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 Vendor: Blueprint for Health

- Vermont Quit Partners and related data was managed by Blueprint for Health, a program within the Agency of Human Services.
- Blueprint for Health uses community-led strategies to improve health and well being, with the goal of connecting Vermonters to whole-person care that is evidence-based, patient- and family-center, and cost-effective.



Notes

- ❖ Data presented in this report provided by National Jewish Health. The 2019 data was pulled from the online platform 07/20/2020.
- Contact Dana Bourne, tobacco treatment specialist, at <u>Dana.Bourne@Vermont.gov</u> with any questions.