

South Carolina's 6 | 18 Initiative Intervention: Medicaid Tobacco Cessation Policy Change Campaign

This communications plan developed by South Carolina's tobacco control team details specific promotional approaches for engaging that state's health care professionals and Medicaid members in order to increase utilization of tobacco cessation support services.

Goal(s)

1. Raise awareness of expanded tobacco cessation benefit for Medicaid members among health care professionals and the regular Medicaid population;
2. Increase proficiency in 2As + R among health care professionals;
3. Increase the number of regular Medicaid callers referred to the S.C. Tobacco Quitline by a health care professional;
4. Increase quit attempts among regular Medicaid members; and
5. Increase the number of fax and e-referrals to the S.C. Tobacco Quitline from health care professionals.

Target Audience(s)

- Community Long Term Care
- Clinicians
- Hospitals
- Physicians
- Managed Care Organizations
- Pharmacists
- Medicaid members

Communications Objective(s)

By January 2018, create/distribute and evaluate educational and training materials for health care professionals related to changes in Medicaid coverage for tobacco cessation and the S.C. Tobacco Quitline.

Activity	Timeframe	Responsible Party	Notes
Meet with MCO's Communications Teams to promote available resources and offer support with communications efforts	June 2017	DHEC DHHS MCO Communications	Follow up with MCOs needed to see if they are using materials or requesting support
Meet with DHHS Medicaid Outreach staff to educate regarding resources and determine needs	Sept. 2017	DHEC DHHS	Identify needed resources for co-branding and best format for delivery
Provide resources for use by DHHS Medicaid Outreach staff and interested MCOs	January 2018	DHEC	Provide materials identified as needed
Notify appropriate health related organizations of policy change	June 2017	DHHS	Additional targets to be identified

Resources Currently Available

Audience	Resource	Source	Notes
Providers	Medicaid Bulletin	DHEC	All materials, including the posters below, would be distributed to target audiences via appropriate delivery method (blast email, website, physical print items, in-person visit, etc.) Also for conference brochures
	Provider Service Center (888) 289-0709	DHHS	
	Pharmacologic Product Guide/2As+R	Optum v. Art Dept?	
	SC Quitline FAQ	DHEC	
	Quitline Fax Referral	DHEC	
	Quitline Rx pads	DHEC	
	Academic Detailing	Optum/DHEC	
	Cessation Services Flyer	Optum/DHEC	
	Print ad in publications targeting providers	Optum v. Art Dept?	
	SC Quit card (Eng/Sp)	DHEC	
6 18 materials (posters)			
Provider Billing Managers	Summary handout on tobacco cessation and reimbursement procedures	DHEC	Requested by DHHS due to relationship of Outreach teams w/ billing managers
Managed Care Organizations (MCO)	6 18 materials (posters)	CDC American Heart Association	MCOs to determine individual member outreach strategies independent of DHEC or DHHS

Strategy

- Send Medicaid bulletin, toll-free number, FAQ, services flyer, and link to EML to order posters, Quit card, pharmacologic guide/2As +R reference card to outside partners like SCHA, SC DMH, ORH, SCPHCA, et al, as well as MCOs;
- Send Medicaid bulletin, toll-free number, FAQ, services flyer as an announcement to health care providers via physician listserv with added language that a DHHS Outreach staff person will be in contact for an in-person visit;
- DHHS Outreach staff conducts in-person visit to go through a packet of materials (with instructions for them) that includes all materials in the email, as well as pharmacologic guide/2As +R card, Quit cards, posters, and information on academic detailing;
- Academic detailing occurs to include instructions on fax and e-referrals in addition to detailed instructions and training on 2As + R; and
- Produce graphic announcing new expansion co-branded with DHEC and Healthy Connections that can be used in publications like SC Physician/Palmetto Nurse, as well as medical conference brochures and other print media reaching this target population.

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By January 2018, create/distribute and evaluate promotional and marketing materials designed to reach Medicaid enrollees or Medicaid eligible South Carolinians related to changes in Medicaid coverage for tobacco cessation and the S.C. Tobacco Quitline.

Audience	Resource	Source	Notes
Managed Care Organizations (MCO)	6 18 materials (posters)	CDC American Heart Association	MCOs to determine individual member outreach strategies independent of DHEC or DHHS
Medicaid Members	<ul style="list-style-type: none"> • SC Quitline card (English and Spanish) • Posters 	DHEC	All DHEC materials need new logo
	Radio	DHEC/SCTFC	Terrestrial Eng/Sp radio station buy
	HOTL church bulletins	DHEC	
	Magnet showing smoking costs w/1-800-QUIT-NOW	DHEC	
	DHHS website ("Schedule of Benefits for All Medicaid Members")	DHHS	
	S.C. Tobacco Quitline Text2Quit program	DHEC/Optum	

Strategy

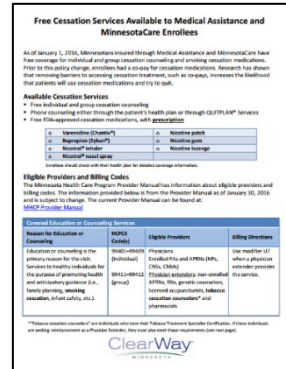
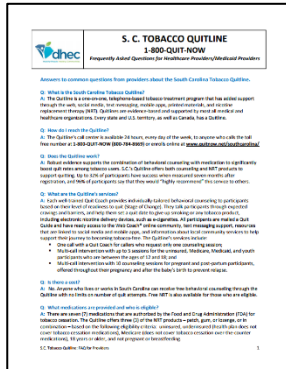
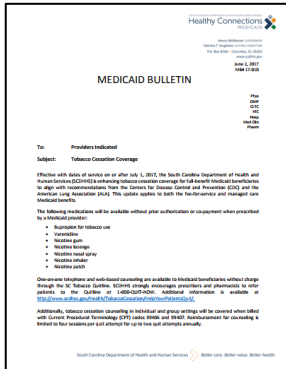
- Conduct outreach to Medicaid members through MCOs;
- Reach Medicaid members in a health care setting through physician engagement (2As + R, Quit cards, and Rx pad) and visual cues (posters);
- Reach Medicaid members through church bulletins, DHHS website, and targeted radio ads; and
- Reach Medicaid members currently enrolled in S.C. Tobacco Quitline Text2Quit program.

Needed Creative (All Strategies)

- Graphic for use as advertisement in health care publications, as clinic poster, and as church bulletin;
- "My doctor saved my life" posters for use in clinics;
- Radio ad;
- Quitline materials updated with new DHEC logo;
- Pharma/2As + R guide;
- Cessation services flyer;
- Magnet graphic; and
- "Announcement" style poster for use in multiple touchpoints.

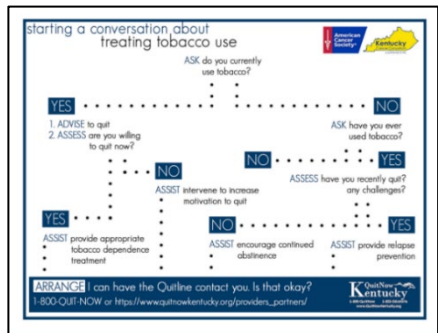
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Email Outreach to Providers and MCOs/Outside Partners

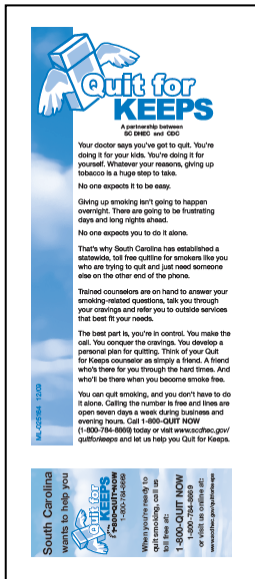


Attachments: Bulletin, Quitline FAQ, Cessation Services

DRUG	INDICATION	MECHANISM OF ACTION	DOSE	CONTRAINDICATIONS	ADVERSE EFFECTS	INTERACTIONS	MONITORING
BUPROPION	Major depressive disorder, seasonal affective disorder, smoking cessation	Norepinephrine and dopamine reuptake inhibitor	150-300 mg daily in divided doses	Seizure, hypotension, tachycardia, hypertension, glaucoma, hyperthyroidism, recent MAOI use	Dizziness, dry mouth, constipation, headache, insomnia, weight loss, increased heart rate	MAOIs, SSRIs, SNRIs, TCAs, tricyclic antidepressants, antipsychotics, anticholinergics, beta-blockers, calcium channel blockers, diuretics, digoxin, lithium, MAOIs, nitrates, sympathomimetics, tricyclic antidepressants	ECG, blood pressure, heart rate, seizure activity
VARENICLINE	Smoking cessation	Partial alpha-4 beta-nicotinic acetylcholine receptor antagonist	0.5 mg twice daily for 7 days, then 1 mg twice daily	Seizure, hypotension, tachycardia, hypertension, glaucoma, hyperthyroidism, recent MAOI use	Headache, dizziness, nausea, vomiting, constipation, dry mouth, increased heart rate, insomnia, weight loss	MAOIs, SSRIs, SNRIs, TCAs, tricyclic antidepressants, antipsychotics, anticholinergics, beta-blockers, calcium channel blockers, diuretics, digoxin, lithium, MAOIs, nitrates, sympathomimetics, tricyclic antidepressants	ECG, blood pressure, heart rate, seizure activity
NICOTINE REPLACEMENT THERAPY (NRT)	Smoking cessation	Partial agonist at alpha-4 beta-nicotinic acetylcholine receptors	Transdermal patch: 7 mg/24 hr or 14 mg/24 hr; Gum: 2 mg or 4 mg; Inhaler: 1 mg; Lozenge: 2 mg	Seizure, hypotension, tachycardia, hypertension, glaucoma, hyperthyroidism, recent MAOI use	Irritation at application site, dizziness, headache, nausea, vomiting, constipation, dry mouth, increased heart rate, insomnia, weight loss	MAOIs, SSRIs, SNRIs, TCAs, tricyclic antidepressants, antipsychotics, anticholinergics, beta-blockers, calcium channel blockers, diuretics, digoxin, lithium, MAOIs, nitrates, sympathomimetics, tricyclic antidepressants	ECG, blood pressure, heart rate, seizure activity



Thumbnails: materials available in the EML (pharma/2As + R guide, Quite card, posters)

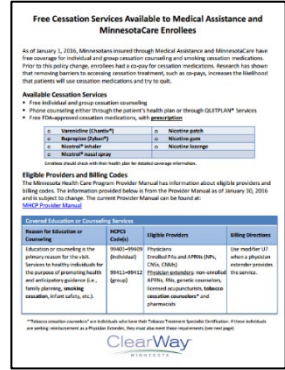
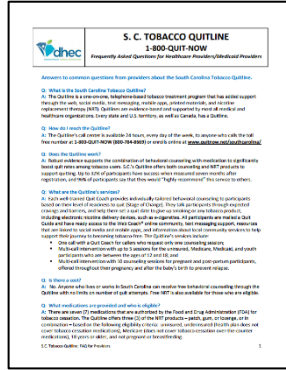
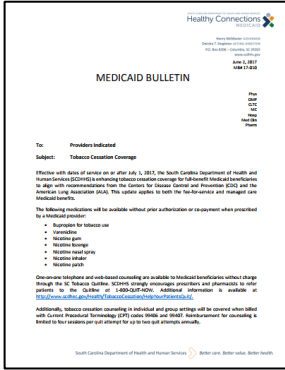


Email to MCOs/Outside Partners would contain attachments, thumbnails of available materials, and a link to the DHEC Educational Materials Library (EML) where they could order those products to be shipped to them free of charge. At this point, outreach to these audiences concludes unless additional support is requested.

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A similar email would be sent to providers statewide **without** the thumbnails and EML link and **with** the addition of language explaining that a DHHS Outreach worker would be coming for an in-person visit to help educate and train them on the policy change. At this point, additional in-person outreach is conducted by DHHS staff.

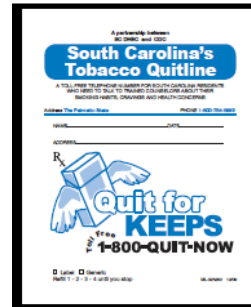
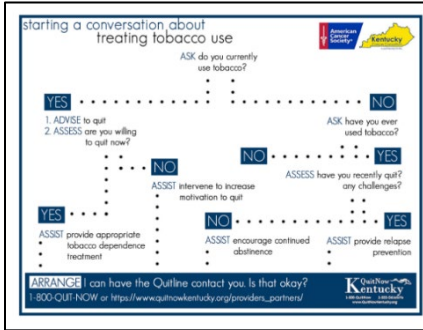
DHHS Outreach



Print versions of bulletin, FAQ, and cessation services flyer

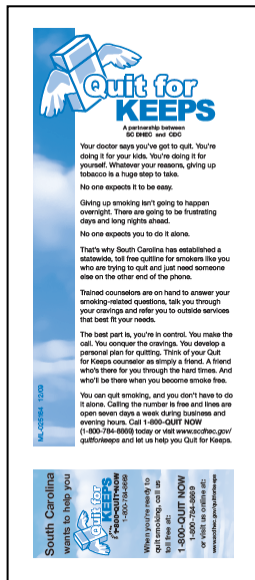
PHARMACOLOGIC PRODUCT GUIDE: FDA-Approved Medications for Smoking Cessation

NAME	INDICATION	CONTRAINDICATIONS	RELATIVE RISK	STATUS	REMARKS
Bupropion HCL (Sustained Release)	Smoking cessation	Seizure disorder, MAOIs, recent MI, recent stroke, recent surgery, recent trauma, recent head injury, recent eye surgery, recent dental surgery, recent anesthesia, recent alcohol consumption, recent drug use, recent surgery, recent trauma, recent head injury, recent eye surgery, recent dental surgery, recent anesthesia, recent alcohol consumption, recent drug use	Low	Approved	First-line treatment
Bupropion HCL (Immediate Release)	Smoking cessation	Seizure disorder, MAOIs, recent MI, recent stroke, recent surgery, recent trauma, recent head injury, recent eye surgery, recent dental surgery, recent anesthesia, recent alcohol consumption, recent drug use	Low	Approved	First-line treatment
Varenicline (Chronic Therapy)	Smoking cessation	Seizure disorder, MAOIs, recent MI, recent stroke, recent surgery, recent trauma, recent head injury, recent eye surgery, recent dental surgery, recent anesthesia, recent alcohol consumption, recent drug use	Low	Approved	First-line treatment
Varenicline (Chronic Therapy)	Smoking cessation	Seizure disorder, MAOIs, recent MI, recent stroke, recent surgery, recent trauma, recent head injury, recent eye surgery, recent dental surgery, recent anesthesia, recent alcohol consumption, recent drug use	Low	Approved	First-line treatment
Transdermal Nicotine Patch	Smoking cessation	Seizure disorder, MAOIs, recent MI, recent stroke, recent surgery, recent trauma, recent head injury, recent eye surgery, recent dental surgery, recent anesthesia, recent alcohol consumption, recent drug use	Low	Approved	First-line treatment
Nicotine Gum	Smoking cessation	Seizure disorder, MAOIs, recent MI, recent stroke, recent surgery, recent trauma, recent head injury, recent eye surgery, recent dental surgery, recent anesthesia, recent alcohol consumption, recent drug use	Low	Approved	First-line treatment
Nicotine Inhaler	Smoking cessation	Seizure disorder, MAOIs, recent MI, recent stroke, recent surgery, recent trauma, recent head injury, recent eye surgery, recent dental surgery, recent anesthesia, recent alcohol consumption, recent drug use	Low	Approved	First-line treatment
Nicotine Lozenge	Smoking cessation	Seizure disorder, MAOIs, recent MI, recent stroke, recent surgery, recent trauma, recent head injury, recent eye surgery, recent dental surgery, recent anesthesia, recent alcohol consumption, recent drug use	Low	Approved	First-line treatment
Nicotine Transdermal System	Smoking cessation	Seizure disorder, MAOIs, recent MI, recent stroke, recent surgery, recent trauma, recent head injury, recent eye surgery, recent dental surgery, recent anesthesia, recent alcohol consumption, recent drug use	Low	Approved	First-line treatment



Laminated 4" x 5" reference card (2-sided)

Mock prescription pad



Stack of Quit cards plus one of each "client poster" and two "announcement" posters (not yet developed)

DHHS staff would receive this packet of materials along with instructions for use and guidance for provider interaction. DHHS staff would also receive information to share regarding academic detailing and the online CME Brief Tobacco Intervention training where providers would learn specifics related to fax and e-referrals. Outreach goals will be established for each DHHS region so that this effort can be properly evaluated.

Additional Outreach

- Academic detailing, if utilized, will be conducted by the SC Tobacco Quitline vendor (Optum);
- Whatever graphic is developed for the “announcement” style poster would also be used to target providers in print publications and in conference brochures;
- All items except the Quitline specific DHEC materials would be co-branded with SC Healthy Connections and DHEC logos;
- Radio ad;
- Church bulletin (same “announcement” graphic);
- DHHS website; and
- Text2Quit.

Evaluation

The effort requires establishing a baseline for both provider awareness (measured by referrals and CME online training), how Medicaid members calling the Quitline heard about the Quitline, and Medicaid member quit attempts. Data for quit attempts among Medicaid smokers can be obtained through 2014 BRFSS data provided by DHEC surveillance staff. Measuring increases/decreases would occur 12 months out through BRFSS. Quitline specific measurements such as “how heard about” and actual counts of fax/e-referrals can be provided at specified intervals from the SC Tobacco Quitline vendor. Data regarding completed CME online Brief Tobacco Intervention training can be provided by SC Tobacco Quitline vendor.