

**Ohio Department of Health
Tobacco Use Prevention and Cessation Program-Nicotine Recovery Unit
Ask/Advise/Refer Quality Improvement Project**

1. Introduction

The Ohio Tobacco Quit Line (OTQL) is a telephonic tobacco cessation program available to all Ohioans. Since the start of the COVID 19 pandemic, call volumes have been severely impacted, with reduced utilization and reduced referrals from Ohio health care providers. In 2020, enrollments were down 21% from the previous year, with some months seeing a 46% reduction in call volumes from previous years. Less than 12% of referrals came from healthcare providers. In 2021 and 2022 volumes have remained lower than previous years.

Studies show advice from a healthcare provider to quit tobacco use is an important motivator to making a cessation attempt, as well as overall patient satisfaction with their healthcare provider.^{1,2}

This project will engage Ohio primary care providers in meaningful use of the OTQL through:

- Training on evidence-based nicotine cessation
- Support for enhanced office workflows that increase provider screening for tobacco use and referrals to the OTQL
- Increased Ohio nicotine-user quit attempts
- Increased successful Ohio nicotine quits

This quality improvement framework will require engagement in ODH-delivered training, check-ins with ODH staff and consultants, and reinforcement of positive results with feedback and data. Because this project entails changes in practice workflows and deliverable-based reporting, provider offices will be compensated for the staff time and resources required to participate and perform successfully.

2. Evidence

A 2019 original paper explored a Web-based approach that combined doctor and patient aligned stipends and information therapy, aimed at improving health and lower costs. Our analysis suggests that the MedEncentive MAIT Program was associated with meaningful reductions in health care utilization that were sustained into the third year of program implementation, through reductions in per capita expenditures and hospitalizations and emergency room use. These findings are in line with previous research on aligned stipend program expenditure outcomes.³

¹ Toll BA, Rojewski AM, Duncan LR, et al. "Quitting smoking will benefit your health": the evolution of clinician messaging to encourage tobacco cessation. *Clin Cancer Res.* 2014;20(2):301-309. doi:10.1158/1078-0432.CCR-13-2261

² Solberg LI, Boyle RG, Davidson G, Magnan SJ, Carlson CL. Patient satisfaction and discussion of smoking cessation during clinical visits. *Mayo Clin Proc.* 2001 Feb;76(2):138-43. doi: 10.1016/S0025-6196(11)63119-4. PMID: 11213301.

³ Greene JC, Haun JN, French DD, Chambers SL, Roswell RH. Reduced Hospitalizations, Emergency Room Visits, and Costs Associated with a Web-Based Health Literacy, Aligned-Stipend Intervention: Mixed Methods Study. *J Med Internet Res.* 2019 Oct 17;21(10):e14772. doi: 10.2196/14772. PMID: 31625948; PMCID: PMC6823604.

3. Deliverables and Budget

Deliverable		Due Date	Estimated Time	Amount
3.1	Complete AAR training (developed/presented by National Jewish Health or ODH)	End of month 2	2 hours	\$500
3.2	Complete post-training assessment and identify office champion/QI Project contact	End of month 4	.5 hours	\$100
3.3	Adopt customized AAR office workflow protocol (samples include HHS version or new NJH process workflows) for individual practice	End of month 6	Varies by practice	\$500
3.4	Quarterly, respond to ODH surveys/engage in conversation regarding Contractor's experience with AAR protocols, resulting office practice changes and lessons learned one year. Sample questions included as Appendix I. (\$1,000.00/quarter)	Quarterly	3-4 hours gathering information, writing report	\$4,000
Total				\$5,100

4. Contract Process

Ohio healthcare providers that wish to engage in this process must do the following:

1. Any entity receiving funds from Ohio Department of Health (ODH) will be required to sign a contract. Please review the sample contract required by ODH and ensure your entity is willing to accept these terms.
2. If you are an entity that wishes to engage in this project, you will need to apply for an OH/ID – Supplier ID number at <https://supplier.ohio.gov> before beginning your application to allow for processing time. Contact Ohio Shared Services at 1-877-644-6771 for assistance.
 - a. If you are already a vendor, please use the same link above to ensure your Supplier ID is active. If it is not active, be sure to reactivate before proceeding.
3. Once you receive your Supplier ID number, send an email to Amy.Gorenflo@odh.ohio.gov with the number and state your intentions to receive a contract for the AAR Quality Improvement Project.
4. You will receive a contract for ODH via email. Please sign and return the contract as soon as possible.
5. You will receive a final executed contract, as well as a purchase order, from ODH.
6. A program contact will reach out to you to begin your project.

Should you have any questions, please contact Amy Gorenflo at Amy.Gorenflo@odh.ohio.gov

Appendix I: Sample Survey Questions

Below is a list of potential survey questions that will be used to check in with healthcare providers that have been trained. Additional questions may be added based on need, or feedback from those participating in the project.

1. Have you used the Ohio Tobacco Quit Line Provider Referral portal this quarter?
 - a. If yes, how many times?
2. Were your patients receptive to using the Ohio Tobacco Quit Line (OTQL)?
3. Did you talk to your patients about use of pharmacotherapy?
4. How did you note referral to OTQL in the medical record?
5. Have you received feedback from OTQL regarding the patients' status?
6. Do you have a process for following up with patients regarding their enrollment?
7. How easy is the OTQL portal to use?
8. What suggestions do you have that could help us improve the process?