

### Tobacco Treatment and Smoke-free Laws: A State Policy Update

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### 50<sup>th</sup> Anniversary of Surgeon General's Report on the Health Consequences of Smoking



1964



2014

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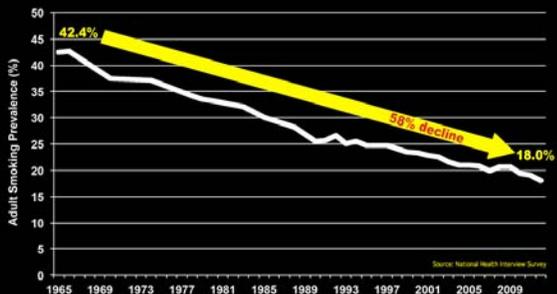
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### National Adult Smoking Trends 1965 - 2012



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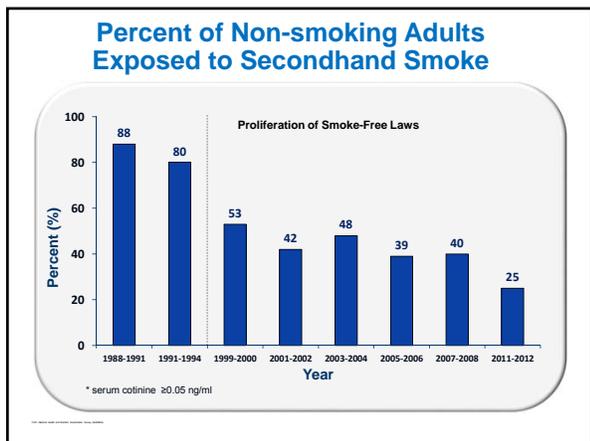
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20,679\* Physicians  
say "LUCKIES are  
*less irritating*"

"It's toasted"  
Your Throat Protection  
against irritation against cough

The figures quoted have been checked and verified by LYBRANO, ROSS BROS. AND MONTGOMERY, Accountants and Auditors.

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Benson & Hedges 100's

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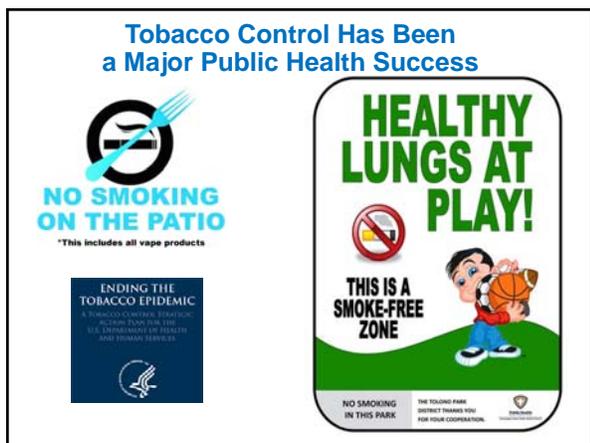
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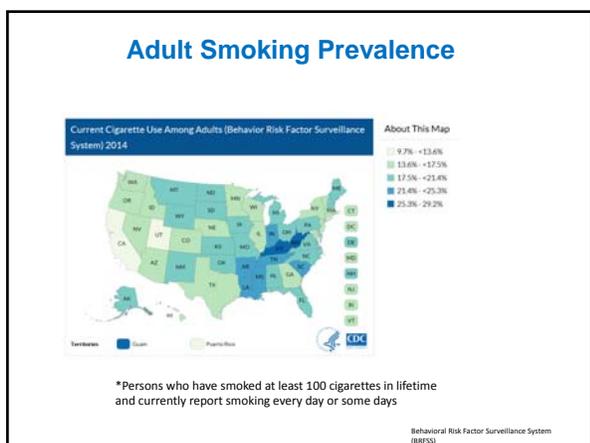
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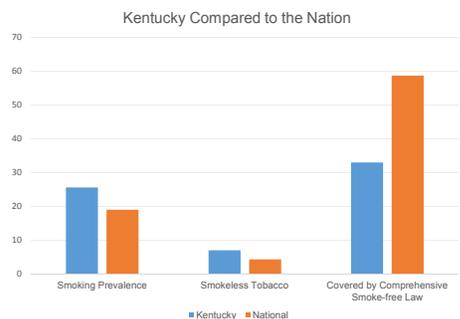
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### Kentucky lags behind the rest of the nation




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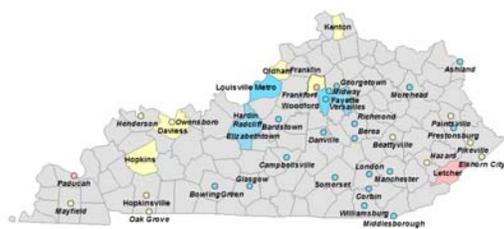
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### Strength of Smoke-free Ordinances in Kentucky Communities



Note:  
 \*SF = Smoke-free  
 \*Hazard County ordinance only covers unincorporated areas of the county



\*Source: Percent of the Kentucky population covered by 100% smoke-free workplace laws. University of Kentucky College of Nursing, Lexington, KY, July 6, 2016

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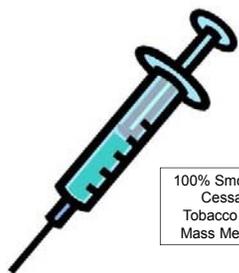
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### The good news? We know what works



100% Smoke-free Policies  
 Cessation Access  
 Tobacco Price Increase  
 Mass Media Campaigns

US Department of Health and Human Services

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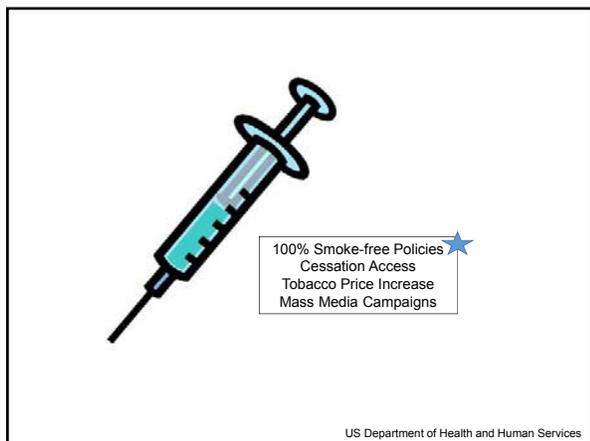
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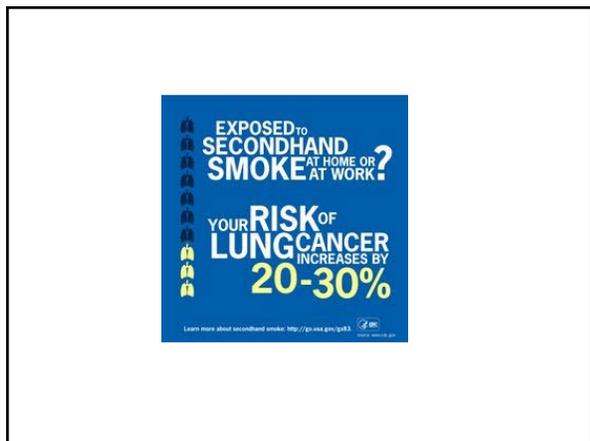
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**More Good News**

Unlike some public health hazards, secondhand smoke exposure is **easily prevented**. Smoke-free indoor environments are proven, simple approaches that prevent exposure and harm.

United States Department of Health and Human Services (2006)

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**100% Smoke-free Laws  
Lead to Reductions in...**



Smoking



Cardiopulmonary and cerebrovascular disease



Asthma Attacks



Ambulance Calls



Death and Disease

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**Even the Tobacco Industry Agrees**

“Financial impact of smoking bans will be tremendous – 3 to 5 fewer cigarettes per day per smoker will reduce annual manufacturer profits a billion dollars plus per year.”

-Philip Morris, 1994

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**Even the Tobacco Industry Agrees**

“Smoking bans are the biggest challenge we have ever faced. Quit rates go from 5% to 21% when smokers work in non-smoking environments.”

-Philip Morris, 1994

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### Kentucky Specific Data

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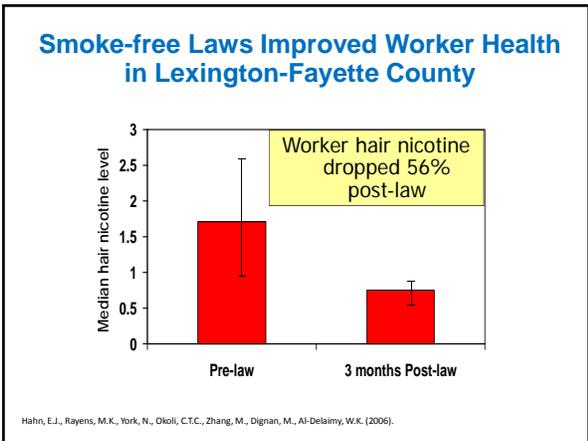
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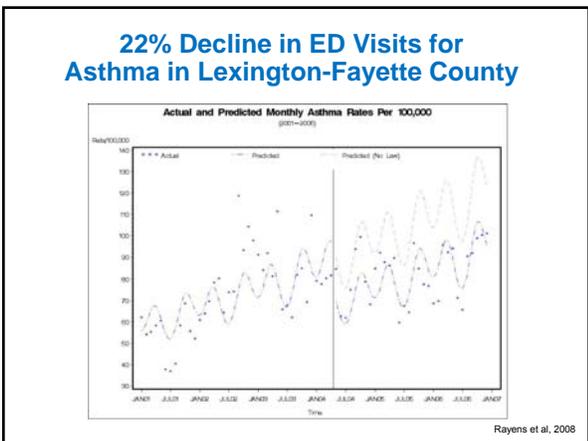
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### Fewer Hospital Visits for COPD

- People with COPD living in Kentucky communities with *comprehensive* smoke-free workplace laws are **22% less likely to be admitted to the hospital** compared to those in communities with moderate-weak or no smoke-free laws.



Hahn et al, 2014

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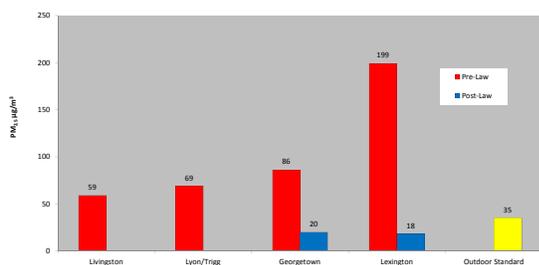
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### Smoke-free Laws Improve Air Quality



The National Ambient Air Quality Standard for PM<sub>2.5</sub> is µg/m<sup>3</sup> for 24 hours. There is currently no indoor air quality standard

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### Smoke-free Laws Save Money

- 32% reduction in adult smoking since Lexington's law took effect
- 16,500 fewer Lexington-Fayette County smokers
- **Impact:** \$21 Million per YEAR in healthcare cost savings




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### Why should healthcare providers be involved in smoke-free advocacy?

- Cost effective, high impact intervention
- Respected voice that community members and officials listen to
- Leave a legacy of health for future generations



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### The 2017 Landscape for Smoke-free



Governor Bevin: *"I believe this should be left to local communities to decide"* (in response to 'Do you support a state smoking ban?')

Sydney Murray, 10/27/15, *Cincinnati Enquirer*

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### Benefits of Focusing on the Local Level

- Create a climate where advocates can spend 100% of their political capital on local laws
- Build momentum with strong local laws (1/3 of Kentuckians covered)
- Better to focus on local level rather than accept a state law that risks damaging progress to date



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### State Preemption

- Higher level of government blocks lower levels from exercising authority on an issue
- Preemption has a negative impact on tobacco control
- Preemption leads to reduced support for smoke-free policies and fewer workers protected from secondhand smoke
- State preemption could overturn the strong local laws we already have

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### Partial Laws Don't Work

- Leave many unprotected
- Create health disparities
- Do not improve population health
- Cause confusion
- They 'stick' and are rarely strengthened




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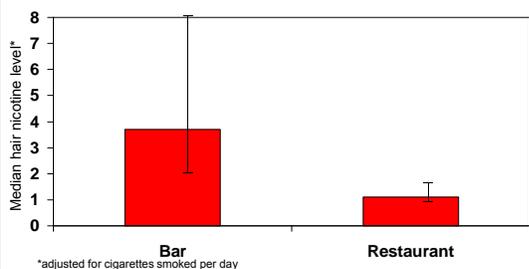
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### Bar Workers Benefited the Most from Lexington's Smoke-free Law



Average decrease in hair nicotine, post-law

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**So, what can I do?**

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**In ten minutes, you can ...**

- Sign up for our listserv at [kcsp00@lsv.uky.edu](mailto:kcsp00@lsv.uky.edu)
- Request a smoke-free yard sign, decal, or other branding materials from your coalition to show support
- Call or email your elected officials to let them know you support smoke-free legislation
- Vote for candidates on election day who support comprehensive smoke-free laws
- Talk about smoke-free with members of other organizations you are in

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**In one hour, you can ...**

- Attend a smoke-free coalition meeting
- Attend a fiscal court or city council meeting to tell elected officials you want smoke-free air
- Write a letter to the editor advocating for smoke-free legislation in your community
- Write a personalized letter to your elected officials advocating for a comprehensive smoke-free ordinance

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**In more than one hour, you can ...**

- Set up a *Lunch and Learn* at your organization to educate others on the benefits of smoke-free legislation
- Collect endorsements from healthcare providers, health groups, and businesses that support clean indoor air
- Research individuals and/or groups who oppose smoke-free initiatives in your community
- Mobilize other citizens in your community to develop a smoke-free coalition

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**KCSP can help!**

- Help communities formulate and reach smoke-free community goals
  - Readiness Assessment (SF CAT)
- Share resources, tools, and strategies that work
- Help to tailor a strategy for each community's needs
- Value added resource



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**KCSP can help you:**

- Build capacity
- Build momentum
- Translate data
- Make the case for policymakers to act

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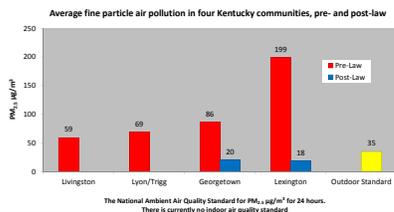
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### Air Quality Research



- Helps communities relay the importance of smoke-free air to their citizens and policymakers
- Helps build demand and awareness for smoke-free through local data




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### Building a Case for Policymakers to Act

- Resolution and petition templates
- Growing legislative champions
- Build on the existing local infrastructure
- Advocacy vs. lobbying
- Public Forum

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### Working Towards Ordinance Enactment

- Policymaker assessments
- American's for Nonsmokers' Rights Model Ordinance
- Legal resources: consultation from the perspective of KY law, ordinance reviews by the Tobacco Control Legal Consortium

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100% Smoke-free Policies  
Cessation Access ★  
Tobacco Price Increase  
Mass Media Campaigns

US Department of Health and Human Services

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**The 2017 Landscape  
for Smoking Cessation Coverage**

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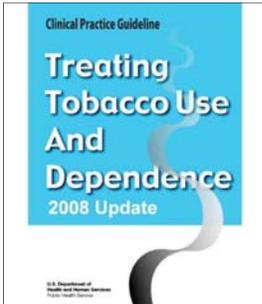
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**Clinical Practice Guidelines**



**Treating Tobacco Use And Dependence**  
2008 Update

U.S. Department of Health and Human Services

**First Line Medications**

- Nicotine Gum
- Nicotine Patch
- Nicotine Inhaler
- Nicotine Lozenge
- Nicotine Nasal Spray
- Bupropion
- Varenicline

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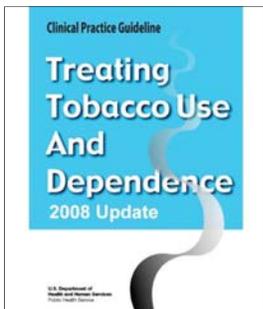
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### Clinical Practice Guidelines



#### Counseling

- One on one
- Group
- Telephone

\*Combination of meds and counseling more effective than either alone!

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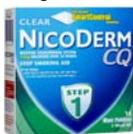
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### CDC Recommended Access to Cessation Services

- Coverage for all 7 medications and 3 types of counseling
- *Eliminate or minimize barriers to accessing treatments*
  - *Co-payments*
  - *Deductibles*
  - *Annual or lifetime dollar limits*
  - *Prior authorization*
- Increase awareness among tobacco users and providers on their health plan coverage




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### The ACA and Tobacco Treatment

#### Traditional Medicaid

- Eligibility varies by state
- What coverage is required?
  - Pregnant women: individual, group, and phone counseling, and all FDA approved meds
  - All Medicaid enrollees: FDA-approved smoking cessation medications

#### Medicaid Expansion and Health Insurance Marketplace Plans

- Federal guidance
  - 4 sessions of individual, group and phone counseling
  - 90 days of FDA approved smoking cessation medications
  - 2 quit attempts per year
  - No prior authorization for treatment
  - No cost sharing

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### The ACA and Tobacco Treatment

#### Kynect Coverage

- 4 counseling sessions and 90 days of medication per quit attempt
- 2 quit attempts per year
- Check with insurance plan for which medications are covered



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### Changes to Kentucky's Medicaid Expansion in 2017?

- June 2016: Governor Bevin presented Kentucky HEALTH , a Section 1115 waiver application
- August 2016: Waiver submitted to Secretary of the Department of Health and Human Services
- Major components of the plan are healthy behavior incentives (MyRewards), no retroactive eligibility, monthly premiums, and lockouts for non-payment
- Unclear impact on tobacco treatment coverage

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### KCSP Recommendations

- All forms of counseling (individual, group, telephonic and online) and all 7 FDA approved medications should be covered
- OTC tobacco treatment medications should be covered outright, without prior authorization, and without using MyRewards account dollars



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### Educating the Healthcare Workforce

- Online Certified Tobacco Treatment Specialist program coming soon! Pilot in October
- Goal of training is to prepare tobacco treatment specialists to provide evidence based treatments for tobacco dependence

More information?  
Audrey Darville  
Audrey.Darville@uky.edu

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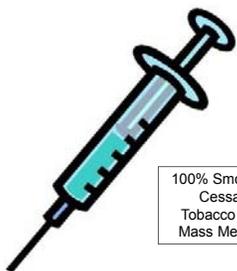
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### We know what works in tobacco control



100% Smoke-free Policies  
Cessation Access  
Tobacco Price Increase  
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US Department of Health and Human Services

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### We know what works in tobacco control

- All Kentuckians should be covered by 100% smoke-free laws
- Everyone needs access to tobacco treatment services without unnecessary barriers
- We can prevent lung cancer with smoke-free laws and tobacco treatment

More information?  
Amanda-Fallin-Bennett  
Amanda.fallin@uky.edu

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