

Cessational News

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Smoking and Mental Illness: Breaking the Link

In the July 21st edition of the New England Journal of Medicine, Judith Prochaska, Ph.D, M.P.H., challenges five prevailing myths which she believes have contributed to the continuing use of tobacco by people with mental illness.

1. Tobacco is necessary self-medication for the mentally ill.
2. People with mental illness are not interested in quitting smoking.
3. Mentally ill people cannot quit smoking.
4. Quitting smoking interferes with recovery from mental illness.
5. Smoking, is the lowest-priority concern for patients with acute psychiatric symptoms.

She concludes the article by stating that "The history of tobacco use in the mental health field is long and troubling. It is time to make effective cessation treatments readily available to all smokers."

New England Journal of Medicine Volume 365 No. 3 pp 196-198

Smokers with Comorbid Conditions Can Quit With Help from Doctors

A study published in Nicotine and Tobacco Research has found that smokers who have a comorbidity with alcohol, drug and mental disorders would benefit greatly from their primary care physicians administering smoking cessation counseling. The study revealed that a smoker would be five times more successful with quitting smoking.

Forty percent of the smoking population have these comorbid conditions which weigh heavily on our healthcare system. Researchers have said, if our doctors would help this population to quit smoking it would improve the health of patients and reduce the burden to our healthcare costs.

Dr. Michael Ong, a researcher at UCLA's Jonsson Comprehensive Cancer Center, who conducted the study, said he hopes the results will be incorporated into new clinical practice guidelines when they are released so that primary care physicians treating smokers with co-morbid conditions realize that smoking cessation counseling in this difficult patient population can be successful.

www.eurekalert.org/pub_releases/2011-08/uoc—swc082211.php and

<http://ntr.oxfordjournals.org/content/early/2011/08/22/ntr.ntr167.short?rss=1>



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New York State
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THE NEW YORK STATE
SMOKERS'
QUITLINE
1-866-NY-QUITS
(1-866-697-8487)





FAQ's: Medicaid Expanded Benefits Smoking Cessation Counseling (SCC)

We know DRs, NPs, and LMs qualify for reimbursements, do PAs?

Physician Assistants cannot bill Medicaid for any service including smoking cessation counseling. However, they can provide SCC in a practitioner's office (physician, nurse practitioner or a licensed midwife) or in a clinic. The practitioner or clinic would bill and receive the reimbursement for SCC.

If a parent of the patient is counseled, can the provider be reimbursed?

A parent(s) can be in attendance during the SCC session; however, the child has to be a smoker in order to bill for SCC services and proper documentation needs to be in the medical record to support the length of time and information included during the counseling session.

For more information on how to bill for SCC services, please refer to the April and May 2011 Medicaid Update publications.

Join us for the Tobacco Cessation Centers' Collaborative Conference Call on Wednesday, **September 7th from Noon to 1PM: "Medicaid & the Expanded Smoking Cessation Counseling Benefit"**

Register at: www.nysmokefree.com/ConfCalls/

The next Collaborative Conference Call is: "Tobacco Use and Diabetes" on Wednesday, November 2nd.

Great American Smokeout November 17



The American Cancer Society is marking the 36th **Great American Smokeout on November 17** by encouraging smokers to use the date to make a plan to quit, or to plan in advance and quit smoking that day. By doing so, smokers will be taking an important step towards a healthier life – one that can lead to reducing cancer risk. Quitting smoking is not easy, but it can be done. To have the best chance of quitting successfully, you need to know what you're up against, what your options are, and where to go for help.

Research shows that people with strong support networks have a better chance of giving up smoking.

New Joint Commission Tobacco Treatment Measure Set

The Joint Commission Measure Set is intended to enhance and broaden the scope of the existing measures and ultimately replace the current National Hospital Quality Measures for Adult Smoking Cessation Advice and Counseling. For more information, go to:

www.jointcommission.org/specifications_manual_for_national_hospital_inpatient_quality_measures/

September 8th - Noon to 1PM: The Tobacco Cessation Centers of New York State and The Joint Commission will provide an informational webinar which will discuss the new set of tobacco treatment measures.

Register at:

<http://roswellpark.adobeconnect.com/treatmentmeasures/event/registration.html>

Questions about registration? Contact Pat Bax at Patricia.Bax@RoswellPark.org

October 20 - Noon to 1PM: There will be a follow-up webinar entitled **"Bedside Counseling for Tobacco Users: Implementing the New Joint Commission Tobacco Measures."**

For more information please call Beth Gero at (315) 261-5436

Labeling Update on Chantix

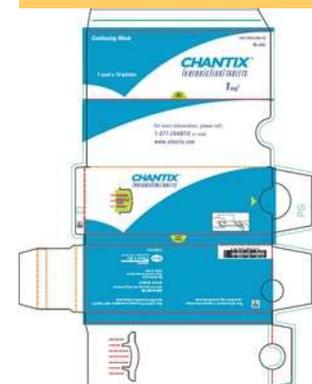
FDA has approved an updated drug label for Chantix (varenicline) to include information about the efficacy and safety of the drug in two patient populations who may benefit greatly from giving up smoking—those with cardiovascular disease and those with chronic obstructive pulmonary disease (COPD).

In the trials, Chantix was effective in helping patients with cardiovascular disease and COPD quit smoking and more than doubled their chance of abstinence for over a year compared to the placebo groups. It demonstrated that Chantix may be associated with a small, increased risk of certain cardiovascular adverse events in the cardiovascular patient. However, the absolute risk of cardiovascular adverse events with Chantix, in relation to its efficacy, is small in this population.

In patients with mild to moderate COPD, adverse events were similar to those seen in studies that were conducted for Chantix's initial approval in 2006, and no new safety concerns were identified.

The updated patient medication guide now includes alternative directions to select a quit date which means a patient should start taking Chantix seven days before their quit date or alternatively between days 8 and 35 of treatment.

www.fda.gov/Drugs/DrugSafety/ucm264436.htm



FACSIMILIE TRANSMITTAL SHEET

To: Tobacco Cessation Center of Northern New York (315) 261-6400 St. Lawrence County

RE: Patient Education Materials and Training Request

Date: _____

- NYS Smokers' Quitline Cards
- NYS Smokers' Quitline "Break Loose" Pamphlets
- Quit Kits
- PHS Clinical Practice Guideline: Treating Tobacco Use And Dependence, 2008 Update
- How Tobacco Smoke Causes Disease (CDC 2010 Surgeon General's Report)
- Tobacco Treatment Performance Improvement Project (20 CMEs)
- In-Service Presentation for _____ staff:
of staff
 - Evidence Based Tobacco Dependence Treatment
 - How to Counsel Patients Ready to Quit Smoking
 - Pharmacotherapy for Tobacco Cessation
 - How to Motivate Patients Not Ready to Quit
 - NY State Smoker's Quitline "Refer to Quit"
 - Other: _____



Contact Information:

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