# Tobacco Recovery Guide

## Provider Reference and Resource Guide

HIGHMARK WHOLECARE

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## Program Overview

Tobacco is the single largest cause of preventable diseases and deaths in the United States, which is why Highmark Wholecare supports providers in integrating Tobacco Recovery into their practice.

Highmark Wholecare continues to encourage and support members to quit using tobacco products by providing members with tobacco recovery benefits, education, and additional resources. Recently, the Pennsylvania Department of Human Services (DHS) has increased its focus on preventing and reducing tobacco use across Pennsylvania. As a result, Highmark Wholecare has enhanced efforts to assist members to quit using tobacco and nicotine products.

Highmark Wholecare knows that providers can have the biggest impact in helping members quit or reduce their use of tobacco and nicotine products. The resources highlighted in this guide can assist in working with Highmark Wholecare members.

## How to Enroll as a Pennsylvania Tobacco Cessation Counselor–PA Medicaid

Research has shown that putting efforts into tobacco cessation is cost effective. Highmark Wholecare covers tobacco cessation counseling sessions as per the Pennsylvania Medicaid Fee Schedule. Counseling should provide strategies to address withdrawal symptoms, educate to prevent relapses, and include follow-up in a co-decided upon amount of time between the provider and their patients.

**Providers can submit claims to receive reimbursement for tobacco cessation counseling for Highmark Wholecare Medicaid members. Here are the steps that providers need to follow:**

**Step 1:** Register to be a pre-approved tobacco cessation provider. This requires a short, one page application and can be found on the **DHS website**.

**Step 2:** Submit the application. The completed application can be faxed, emailed, or mailed to the Department of Health:

**Fax: 717-214-6690**

**Email: RA-Registry@pa.gov**

**Mail:**
Pennsylvania Department of Health Bureau of Health Promotion and Risk Reduction Division of Tobacco Prevention and Control
625 Forster Street, Room 1032
Harrisburg, Pennsylvania 17120

**Step 3:** Complete a 45-minute, free, online training called, "Every Smoker, Every Time" which can also be accessed via the **DHS website**. Providers do not have to renew these steps once they are completed–providers will always be on the registry unless otherwise notified by the State.

Once the above steps have been completed, providers are able to be reimbursed for tobacco cessation services!

To bill for tobacco cessation counseling services, Highmark Wholecare covers 70, > 10-minute counseling sessions per year per member. To bill, use the procedure code 99407. Please follow CPT guidelines around billing for separate and distinct services for the use of modifier 25.

## Screening for Tobacco Use

Screening for tobacco use and vaping should begin at age 11 and continue at least annually through adulthood.

**Suggested Screening Tools include:**

- Hooked on Nicotine (HONC)
- E-cigarette Dependence Scale
- Modified Fagerstrom Tolerance Questionnaire

## Brief Interventions to Support Tobacco Recovery

It can be difficult to get someone to stop using tobacco or reduce their use of tobacco. But keep in mind that seven out of every 10 smokers want to quit or cut down, and only 20% of those will do it on their own or ask for help. That means that as a medical provider, tobacco users benefit from the topic of cessation being explored on a regular basis. Research has shown that even three minutes of counseling doubles the chances that someone will stop tobacco use, versus simple advising. Motivational interviewing is a patient centered method for strengthening an individual's own motivation and commitment to making positive behavior changes and opens the conversation to provide resources and supports. The following are some suggestions regarding how to talk with someone about tobacco cessation through the use of the 5As or the 5Rs.

**Use the 5As to assess willingness to quit and help them get there:**

| | | | | |
|---|---|---|---|---|
| **Ask** about and document tobacco use status at EVERY visit. | **Advise** in a clear, direct, personalized manner that tobacco users stop smoking. | **Assess** willingness to quit at this time. For former tobacco users, ask how recently they stopped and what challenges they may still have trouble dealing with. | **Assist** by prescribing Nicotine Replacement Therapy (NRT) unless medically contraindicated. | **Arrange** follow up, including counseling. |

**For those who are not yet ready to quit, use the 5Rs:**

| | | | | |
|---|---|---|---|---|
| **Relevance:** Digging deeper to find why the patient does not want to quit and why quitting is relevant to them. (Motivational interviewing tactics would come in handy here!) | **Risks:** Remind the patient what the ongoing risks of continued tobacco use has the potential to do their body. | **Rewards:** Willingness to quit at this time. For former tobacco users, ask how recently they stopped and what challenges they may still have trouble dealing with. | **Roadblocks:** Identify common challenges that most quitters go through, such as withdrawl symptoms, weight gain, relapse, etc. | **Repeitition:** Continue to ask about their willingness to quit, ideally at every single visit. |

**Based on the patient's specific needs, circumstances, and health, there are additional educational opportunities available as well.**

| Topic | Talking Points |
|---|---|
| **Secondhand Smoke** | There is no safe level of exposure to secondhand smoke. Even brief exposure can cause serious health problems. Secondhand smoke can cause coronary heart disease, stroke, and lung cancer in adults who do not smoke. Infants and young children are especially impacted by health problems caused by secondhand smoke because their bodies are still growing.<br><br>**Children exposed to secondhand smoke are at an increased risk for:**<br>• Sudden infant death syndrome (SIDS).<br>• Acute respiratory infections, such as pneumonia and bronchitis.<br>• Middle ear disease.<br>• More frequent and severe asthma.<br>• Respiratory symptoms.<br>• Slowed lung growth. |

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| Topic | Talking Points |
| --- | --- |
| **E-Cigarettes and Vapes** | **The health risks of vaping include:**<br>• Addiction–E-cigarettes contain nicotine, a drug that's highly addictive. You don't have to vape every day to get addicted.<br>• Anxiety and depression–Nicotine makes anxiety and depression worse. It also affects memory, concentration, self-control, and attention, especially in developing brains.<br>• Becoming a smoker–People who vape are more likely to start smoking regular (tobacco) cigarettes and may be more likely to develop other addictions in the future.<br>• Sleep problems.<br>• Exposure to cancer-causing chemicals.<br>• Chronic bronchitis.<br>• Lung damage that can be life-threatening.<br>Other health effects are possible that are not yet identified. Vaping hasn't been around that long, so its health risks aren't all known. |

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| Topic | Talking Points |
| --- | --- |
| **Cardiovascular** | Smoking cessation is one of the most important actions people who smoke can take to reduce their risk for cardiovascular disease. This is true for all people who smoke, regardless of age or smoking duration and intensity. The health benefits of smoking cessation also extend to patients already diagnosed with heart disease.<br><br>**The cardiovascular benefits of smoking cessation include:**<br>• Reduces markers of inflammation and hypercoagulability.<br>• Leads to rapid improvement in high-density lipoprotein cholesterol (HDL-C) levels.<br>• Reduces the development of subclinical atherosclerosis and slows progression as time since cessation lengthens.<br>• Reduces the risk of disease and death from cardiovascular diseases (CVDs).<br>• Reduces the risk of coronary heart disease, with risk falling sharply one to two years after cessation and then declining more slowly over the longer term.<br>• Reduces the risk of disease and death from stroke, with risk approaching that of those who have never smoked after cessation.<br>• Reduces the risk of abdominal aortic aneurysm, with risk decreasing with time since cessation.<br>• May reduce the risk of atrial fibrillation, sudden cardiac death, heart failure, venous thromboembolism, and peripheral arterial disease.<br><br>The CDC's **Smoking and Cardiovascular Disease fact sheet** provides additional information. |

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| Topic | Talking Points |
|---|---|
| **Respiratory** | Smoking cessation is one of the most important actions people who smoke can take to improve their health and reduce their risk for chronic obstructive pulmonary disease (COPD). This is true for all people who smoke, regardless of age or smoking duration and intensity. The health benefits of smoking cessation also extend to people already diagnosed with COPD.<br><br>**The respiratory benefits of smoking cessation include:**<br>• Reduces the risk of developing COPD.<br>• Slows the progression of COPD among people with this condition and reduces the loss of lung function over time.<br>• Reduces risk of cancers in the respiratory system.<br>• Reduces respiratory symptoms such as cough, sputum production, and wheezing.<br>• Reduces respiratory infections such as bronchitis and pneumonia.<br>• Research suggests cessation may improve lung function, reduce symptoms, and improve treatment outcomes among people with asthma. |
| **Cancer** | Smoking cessation is one of the most important actions people who smoke can take to improve their health and reduce their risk for cancer. This is true for all people who smoke, regardless of age, how much, or how long they have smoked. For patients with cancer, studies suggest that quitting smoking can significantly reduce mortality and improve their prognosis.<br><br>Smoking cessation reduces the risk of 12 different types of cancer including lung, larynx, oral cavity and pharynx, esophagus, pancreas, bladder, stomach, colon and rectum, liver, cervix, kidney, and acute myeloid leukemia (AML). |

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| Topic | Talking Points |
|---|---|
| **Maternal and Infant Care** | Smoking cessation is one of the most important actions women who smoke can take for a healthy pregnancy and a healthy baby. The best time for women to quit smoking is before they try to get pregnant. But quitting at any time during pregnancy can benefit the health of both the mother and the baby.<br><br>**The reproductive health benefits of smoking cessation include:**<br>• Smoking cessation during pregnancy reduces the effects of smoking on fetal growth. Cessation early in pregnancy eliminates the adverse effects of smoking on fetal growth.<br>• Smoking cessation before or during early pregnancy reduces the risk for a small-for-gestational-age birth.<br>• Research suggests that smoking cessation may reduce the risk of preterm delivery. |
| **Adolescents** | Vaping or use of tobacco can have a negative impact on the ability to breath and can impact athletic performance. Additionally, vaping or the use of tobacco can impact brain development.<br><br>In addition to the above health impacts, vaping or using tobacco can also have more cosmetic effects, such as stained teeth, bad breath, yellow skin of the fingers, and premature wrinkling.<br><br>Addressing peer pressure–having friends who use tobacco doubles the risk that youth will start using some form of tobacco product themselves. |

# Treatment Options and Resources to Support Tobacco Recovery

Smokers are twice as likely to be successful at quitting if they use a drug therapy.

Quitting the use of tobacco or nicotine products can be challenging. Medications and other products can significantly increase chances of success. These tools, such as NRT or prescription medications, help manage withdrawal symptoms like cravings and irritability, making it easier to resist the urge to smoke. By reducing the physical dependence on nicotine, these aids allow individuals to focus on the mental and emotional aspects of quitting, ultimately leading to a healthier and smoke-free life.

Below are some various replacement therapies that may be available as well as things to consider to determine whether they may be the right fit for the individual.

### Nicotine Replacement Therapies

| Product | Cautions and Warnings | Possible Side Effects | Recommended Dosage |
|---|---|---|---|
| **Gum/ Lozange** | Caution with dentures.<br>Do not eat or drink 15 minutes before or during use. | • Dyspepsia<br>• Nausea<br>• Mouth irritation | **Weeks 1-6:** Q 1-2 hours or at least 9 pieces/day.<br>**Weeks 7-9:** Q 2-4 hours.<br>**Weeks 10-12:** Every 4-8 hours.<br>**Recommended duration:** Up to 6 months. |

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**Nicotine Replacement Therapies** *continued*

| Product | Cautions and Warnings | Possible Side Effects | Recommended Dosage |
|---|---|---|---|
| **Patch** | Do not use with psoriasis or eczema. | • Insomnia<br>• Local skin irritation | **If ≤ 10 cigarettes/day:**<br>• 14 mg/day for 6 weeks.<br>• 7 mg/day for 2 weeks. Can continue 7 mg/day if urge continues.<br>**If > 10 cigarettes/day:**<br>• 21 mg/day for 6 weeks.<br>• 14 mg/day for 2 weeks.<br>• 7 mg/day for 2+ weeks.<br>**Recommended duration:** 8 or 12 weeks.<br>FDA approved for 3–5 months. |

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## Non-Nicotine Replacement Therapies

| Product | Cautions and Warnings | Possible Side Effects | Recommended Dosage |
|---|---|---|---|
| **Varenicline (Chantix)** | **Use caution with the following:**<br>• Psychiatric disorders<br>• Cardiovascular disease<br>• Seizure disorders<br>• Severe renal impairment<br>(CrCl < 30 mL/min) | • Nausea<br>• Insomnia or dreams<br>• Headache<br>• Depressed mood<br>• Agitation or behavioral changes<br>• Suicide ideation | **Days 1-3:** 0.5 mg/day.<br>**Days 4-7:** 10.5 mg twice a day.<br>**Days 8 through end:** 1 mg twice daily.<br>**Recommended duration:** Chantix (R) can be used for 12 weeks. For patients that successfully stopped during first 12 weeks, another 12 weeks of treatment is recommended. |
| **Bupropion SR (Zyban, Wellbutrin SR)** | Contraindicated in those with seizure disorders, anorexia, or bulimia.<br>Can be used in combination with tobacco cessation products containing nicotine. | | **Start 1-2 weeks prior to quitting:** 150 mg QAM x 3 days.<br>**Then:** 150 mg BID; doses should be at least 8 hours apart.<br>**Not to exceed** 300 mg daily. Continue for 7-12 weeks.<br>**Recommended duration:** Up to 6 months post-quit to maintain cessation. |

**To find the Highmark Wholecare coverage for these products, please refer to the below resources:**

- For Highmark Wholecare PA Medicaid Members:
  - **Highmark Wholecare Formulary**
  - **Pennsylvania DHS Statewide Preferred Drug List**
- For Highmark Wholecare Medicare D-SNP Members:
  - **Highmark Wholecare Medicare Assured Diamond/Ruby Formulary**
  - **Highmark Wholecare Medicare OTC Medication Benefits**
- Tobacco Cessation Counseling–Providers who are registered with Pennsylvania can provide and bill for up to 70, > 10-minute counseling sessions per year per member.

## Referring Members to the PA Free Quitline

The PA Free Quitline is a free program offered by the State to help Pennsylvanians who want to quit prepare a quit plan, understand tobacco triggers, manage cravings, and much more. The PA Free Quitline will set up counseling services over the phone at the patient's convenience, before, during, and after their quit date. They may also talk about quit therapies, overcoming the challenges of quitting, and keeping them on track, all at no cost.

You can visit the **PA Free Quitline's website** for information on referring patients to the Quitline. There are two ways to refer patients: provider referral and self-referral. The benefit of making a referral as opposed to having them self-refer, is that the Quitline will communicate the patient's progress back to you. You can track whether they are sticking to their goals, using NRT therapy, and communicating with their counselor. Knowing the patient's progress through the Quitline may help future visits with those patients.

Patients can also refer themselves **online** or by phone at **1-800-QUIT-NOW (784-8669)**. On the website, they can find tobacco cessation information, self-help tools, and a **self-referral form**.

**The PA Free Quitline also offers special programs:**

- **Pregnant and Postpartum Program**
- **Youth Tobacco and Vaping Cessation Program**–Text or call **1-855-891-9989** for real-time coaching.

### Additional Tobacco Cessation Resources

| Resource | Phone | Website |
|---|---|---|
| **Highmark Wholecare** | **1-800-392-1147** | **HighmarkWholecare.com** |
| **Pennsylvania Free Quitline** | **1-800-784-8669** | **pa.quitlogix.org/en-US/** |
| **American Cancer Society** | **1-800-227-2345** | **cancer.org** |
| **American Heart Association** | **1-800-242-8721** | **heart.org** |
| **American Lung Association** | **1-800-586-4872** | **lung.org** |
| **Breathe Pennsylvania** | **724-772-1750** | **breathepa.org** |
| **Nicotine Anonymous** | | **nicotine-anonymous.org** |

### Pennsylvania Regional Primary Contractors to Provide Tobacco Use Prevention and Cessation Activities Across Pennsylvania

| Counties | Contact Information |
|---|---|
| Allegheny County | Tobacco Free Adagio Health<br>Phone: **412-350-8785**<br>**tobaccofree.adagiohealth.org/** |
| Cameron, Clarion, Clearfield, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango, and Warren Counties | Tobacco Free Adagio Health<br>Adagio Health, Inc.<br>Phone: **412-253-8170**<br>**tobaccofree.adagiohealth.org/** |
| Armstrong, Beaver, Butler, Cambria, Fayette, Greene, Indiana, Somerset, Washington, and Westmoreland Counties | Tobacco Free Adagio Health<br>Adagio Health, Inc.<br>Phone: **443-605-8018**<br>Fax: **412-288-9036**<br>**tobaccofree.adagiohealth.org/** |

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**Pennsylvania Regional Primary Contractors to Provide Tobacco Use Prevention and Cessation Activities Across Pennsylvania** *Continued*

| Counties | Contact Information |
|---|---|
| Adams, Bedford, Blair, Carbon, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lackawanna, Lebanon, Lehigh, Luzerne, Mifflin, Monroe, Northampton, Perry, Pike, Susquehanna, Wayne, Wyoming, Bradford, Centre, Clinton, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, Union, and York Counties | American Lung Association in Pennsylvania<br>Phone: **717-971-1126**<br>**lung.org** |
| Philadelphia County | Philadelphia Department of Public Health<br>Phone: **215-685-5620**<br>**https://www.phila.gov/programs/tobacco-policy-and-control-program/** |
| Berks, Bucks, Chester, Delaware, Lancaster, Montgomery, and Schuylkill Counties | Health Promotion Council of Southeastern PA, Inc.<br>Phone: **215-731-6154**<br>Fax: **215-731-6199**<br>**hpcpa.org** or **sepatobaccofree.org** |

Document updated: 9/26/2024

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