

The Great State Update – New York and North Carolina: Effective Partnerships to Treat Tobacco Addiction in Behavioral Health Settings

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August 2, 2022

Moderator

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Deputy Director

Smoking Cessation Leadership Center
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A National Center of Excellence for Tobacco-
Free Recovery

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Disclosures

This UCSF CME activity was planned and developed to uphold academic standards to ensure balance, independence, objectivity, and scientific rigor; adhere to requirements to protect health information under the Health Insurance Portability and Accountability Act of 1996 (HIPAA); and include a mechanism to inform learners when unapproved or unlabeled uses of therapeutic products or agents are discussed or referenced.

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Thank you to our funders



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California
Behavioral Health
& Wellness Initiative

THE FUTURE LOOKS **BRIGHT**

- **Free CME/CEUs** will be available for all eligible California providers, who joined this live activity thanks to the support of the California Tobacco Control Program (CTCP)
- For our California residents, SCLC offers regional trainings, online education opportunities, and technical assistance for behavioral health agencies, providers, and the clients they serve throughout the state of California.
- For technical assistance please contact (877) 509-3786 or Jessica.Safier@ucsf.edu.
- Visit CABHWI.ucsf.edu for more information

Today's Presenter

Flavio Casoy, MD

Medical Director of Adult Community
Services and Managed Care

NYS Office of Mental Health



Today's Presenter

Susan Friedlander, LCSW

Director, Community Integration &
Wellness

New York City Field Office – Office of
Mental Health



Today's Presenter

Maxine Smalling, MS, BS(N), RN

Chief Executive Nursing Officer

NYS Office of Mental Health



Today's Presenter

Kim Bayha, CTTS

Tobacco Prevention & Control Program
Supervisor

Mecklenburg County Public Health, Office
of Policy and Prevention



Today's Presenter

Stephanie Gans LCAS, MSW, NCTTP

North Carolina Division of Public Health

Tobacco Prevention and Control Branch





**Office of
Mental Health**

New York State OMH Update

Smoking Cessation Leadership Center Webinar

**Maxine Smalling, MS, BS(N), RN
Susan Friedlander, LCSW
Flávio Casoy, MD**

August 2, 2022

Tobacco-Free Campuses

- 21 of 23 NYS OMH State Psychiatric Center Campuses now have a Tobacco free campus wide policy
 - On two campuses, policies are pending resolution of labor-management issues
- All Psychiatric Center pharmacies formularies now include varenicline, bupropion, and all forms of NRT
- Proposed changes to NYS Clean Indoor Air Act

How did we accomplish the change?

Organizational Change Approach

- **Pillars of Organization Change**

- **Policy**-assess changes needed, plan with timeliness, implement, evaluate
- **Communication**-Consistent message and signage
Health and wellness, supportive, non-punitive
- **Staff Support**-Leadership Buy-in, collaboration with unions, key partners partners, staff trainings(FIT Modules-NYSPI-CPI, Treating Tobacco Dependence in Behavioral Health Settings 2 Day training by Dr. Jill Williams and Team, Rutgers University)availability of Nicorette gum/Lozenge
- **Patient/Client Support**-Maximal access to support and treatment, screening, assessment, counseling, support, Peer Advocates, medication-assisted treatment (MAT) using FDA approved medications to treat TUD

(Parks J, Jewell P, editors. NASMHD, 2006; Ziedonis, Douglas, 2007)



Promoting Health in a Tobacco-Free Environment

By promoting a tobacco-free environment, the Office of Mental Health is working to prevent the loss of lives and the disabling effects of tobacco use, including:

Asthma, Bronchitis, and Chronic Obstructive Lung Disease
People with chronic obstructive pulmonary disease (COPD) and asthma have a higher risk of death from heart disease, stroke, and cancer.

Cancer
People who smoke are at higher risk of getting various types of cancer, including lung, breast, and prostate cancer.

Vision Loss
Short-term use of tobacco can lead to long-term vision loss.

Any door is appropriate in making that first step to get help!

Diabetes
Smoking increases the risk of developing type 2 diabetes, a condition that can lead to serious complications, such as blindness, kidney failure, and stroke.



OMH is strongly in support of not only state-of-the-art tobacco-free policies, but also of the health care providers who are working to help people quit smoking. All of our state-operated campuses are tobacco-free to better serve you.



Ways that OMH can help you quit

What OMH is doing for your health

- Supporting your recovery by:
 - Making all of our campuses tobacco-free.
 - Educating your doctors and nurses on treatment to help you quit smoking.
 - Creating therapies and activities to help.
 - Providing peer advocates to work with you.
 - Making nicotine replacement medications available.
 - Providing families, friends, and visitors with ways to support your quit effort.

What you need to do

Talk to a Doctor Nurse Clinician

Don't expect when you quit smoking

- Health won't be better
- Stained teeth get whiter
- Bad smell in clothes and hair go away
- Yellow fingers and fingernails disappear
- Food tastes better
- Sense of smell returns to normal
- Everyday activities (such as climbing stairs or light house work) no longer leave them out of breath
- They can be in smoke-free buildings without having to go outside to smoke.

The New York State Office of Mental Health supports tobacco-free living

This is a Tobacco-Free Campus

No Smoking No Fume

For more information please visit www.omh.ny.gov

Office of Mental Health

12" x 18"

The New York State Office of Mental Health supports tobacco-free living

This is a Tobacco-Free Campus

NO SMOKING NO FUME

Office of Mental Health

18" x 24"

Old Medicaid Benefits

- 2 – 90 day trial limits
- Prior authorization allowed
- Variable med coverage
- Single prescription only



Medicaid
and your **Doctor**
can help you
Quit Smoking

Medications are covered.
Call **1-866-NYQUITS**
for more help.



New Medicaid Benefits

- Unlimited trials
 - No prior authorization allowed
 - All FDA-approved meds covered by all plans
 - 2 prescriptions can be filled at once
- ### **6|18 Initiative**

- 1) Expand Medicaid benefits
- 2) Remove barriers to accessing benefits
- 3) **Promote utilization of benefits**

Additional Regulatory Updates

- As NYS OMH updates regulations for different licensed mental health programs (e.g. Clinic, ACT, etc), regulatory barriers to treating tobacco use disorder (and other substance use disorders) are modified;
- As a result of improved compliance with MH parity laws, there is no longer a numeric “cap” on the number of allowable yearly smoking cessation counseling visits

Learning Collaborative

- Partnership with Columbia University/New York State Psychiatric Institute over last 4 years (and counting)
- In each State Psychiatric Center, outpatient clinics, residential programs, and/or inpatient units participated in year-long collaboratives to develop champions, improve knowledge, and introduce treatment of tobacco use disorder into overall treatment goals

Close Collaborations

- NYS OMH is proud to learn from and advise the NYS Department of Health's Bureau of Tobacco Control in its Health System Grants program to reduce rate of TUD in the behavioral health population.
- We are also proud to work closely with the NYC Department of Health and Mental Hygiene in an interagency tobacco workgroup

Program Innovation – “Crushing Cravings”

- 2016: NYS Psychiatric Centers go Tobacco-Free...and there are unintended consequences!
- OMH and the NYC Dept of Health partner with residential providers at the Creedmoor campus to address the rise of indoor tobacco use
- Monthly discussion: what are you doing now? What's working?

Key Observations

1. We generally offer a cessation message to people in pre-contemplation
2. We are often in an enforcement role rather than being empathic and engaging.
3. We focus on health consequences of tobacco rather than the impact on recovery, achieving life role goals and community inclusion
4. Most people (staff, consumers) are not familiar with how to correctly use NRT products
5. We lack tobacco-focused Peer Support in NYS and tobacco is not addressed in Peer Support training

A New Approach: “Crushing Cravings”!

- 12-session stagewise curriculum for tobacco-users in pre-contemplation
- Focus on using NRT to manage cravings and withdrawal in settings where tobacco use is prohibited
- Education regarding proper use of NRT products; NRT “show and tell”
- Feel Good Activities
- “Dear Colleague/Dear Prescriber” Letter
- Goal is comfort, confidence, self-efficacy and improved community inclusion
- “Crushing Cravings” is NOT for quitters!

“Crushing Cravings” ---The Evidence

- Preliminary data in residential settings shows significant uptick in NRT use and reduction of indoor smoking incidents
- Increase in staff knowledge regarding TUD and treatment
- Staff are equipped with a supportive intervention when enforcing smoking policy.
- Increased awareness of tobacco issues throughout hospital

Adapting “Crushing Cravings”

Clinic

- For people in Pre-Contemplation, Contemplation
- More process-oriented
- Explores personal relationship with tobacco as well as offering treatment information if interested in reducing or quitting.

State-Operated Inpatient Units (2-part Curriculum)

- “Chill Choices” (14 sessions for all tobacco users): focuses on identity (“Are you a smoker who doesn’t have access to tobacco right now...or could hospitalization be an opportunity to become a non-smoker?”); builds motivation by exploring impact on recovery, finances, community inclusion; provides NRT education and other coping strategies; playful/relaxing tone.
- “Keep Quit” (ongoing for people who are interested in reducing/remaining tobacco-free after discharge): focus on discharge planning; on-going outpatient treatment; anticipated triggers, peer support, etc.
- Swag: T-shirts, face masks; wellness products

Program Innovation – Peer Support

- A sensitive topic!
- OMH-funded Academy of Peer Support now includes 5 tobacco modules
- 2022 NYC Working Peer Specialist Conference Workshop: “Talking About Tobacco: Peer Champions for Life Saving Conversations”
- NYC Health & Hospitals Peer Specialist Training
- NY Behavioral Health Tobacco Workgroup: Curriculum for Peer Specialists

Challenges and Opportunities

Program & Policy (Inpatient and clinic settings)

- Use of TUD Order Sets-Psychiatric prescribers to advance MAT for the treatment of TUD for SMI population, building collaborations with key partners
—**Under development OMH State Operated PCs**
- Availability of a digital media *toolkit-Treating Tobacco Use Disorder in Behavioral Health Populations: Innovative Approaches and Uses of Approved Medication*
- **Continue efforts to amend the NYS Clean Indoor Act**
 - *To achieve full enactment of Tobacco free campus-wide policy covering all OMH State Operated campuses and community programs*

(Cicatelli Associates, Center of Excellence for HSI, NYS DOH Tobacco Control, 2022)

BreatheEasyNC

Becoming Tobacco Free

The Great State Update – New York and North Carolina: Effective Partnerships to Treat Tobacco Addiction in Behavioral Health Settings

August 2, 2022

Stephanie Gans LCAS, MSW, NCTTP & Kim Bayha CTTS

North Carolina

BreatheEasyNC

Becoming Tobacco Free

A statewide effort to support people with behavioral health conditions, intellectual or developmental disabilities (IDD), and traumatic brain injuries (TBI) in becoming tobacco free, by working with service providers to **integrate tobacco use treatment** and **take campuses tobacco free**.

Where did NC start?

RECEIPT OF TOBACCO CESSATION TREATMENTS AMONG MEDICAID ENROLLEES TRYING TO QUIT SMOKING, 2010-2014

Study looked at 37 states, including North Carolina, and claims for tobacco use treatment

North Carolina ranked **last** for Medicaid claims for tobacco use treatment medications and counseling, among all of the states in the study

Less than **1%** of smokers enrolled in NC Medicaid had claims for medications or counseling in this time period

BH MANAGED CARE SYSTEM- SILOED PHYSICAL & MENTAL HEALTH

LME-MCO Communication Bulletin #J148

Date: July 21, 2015
To: LME-MCOs
From: Kathy Nichols, Lead Waiver Program Manager, Behavioral Health Section, DMA and Mabel McGlothlen, LME System Performance Team Leader, DMH/DD/SAS
Subject: Tobacco Use Disorder

The purpose of this bulletin is to offer resources for tobacco cessation and to clarify that tobacco cessation programs are covered by LME-MCOs and can be billed by physicians and physician extenders. Physicians, nurse practitioners and physician assistants can use codes 99406 and 99407 for this purpose.

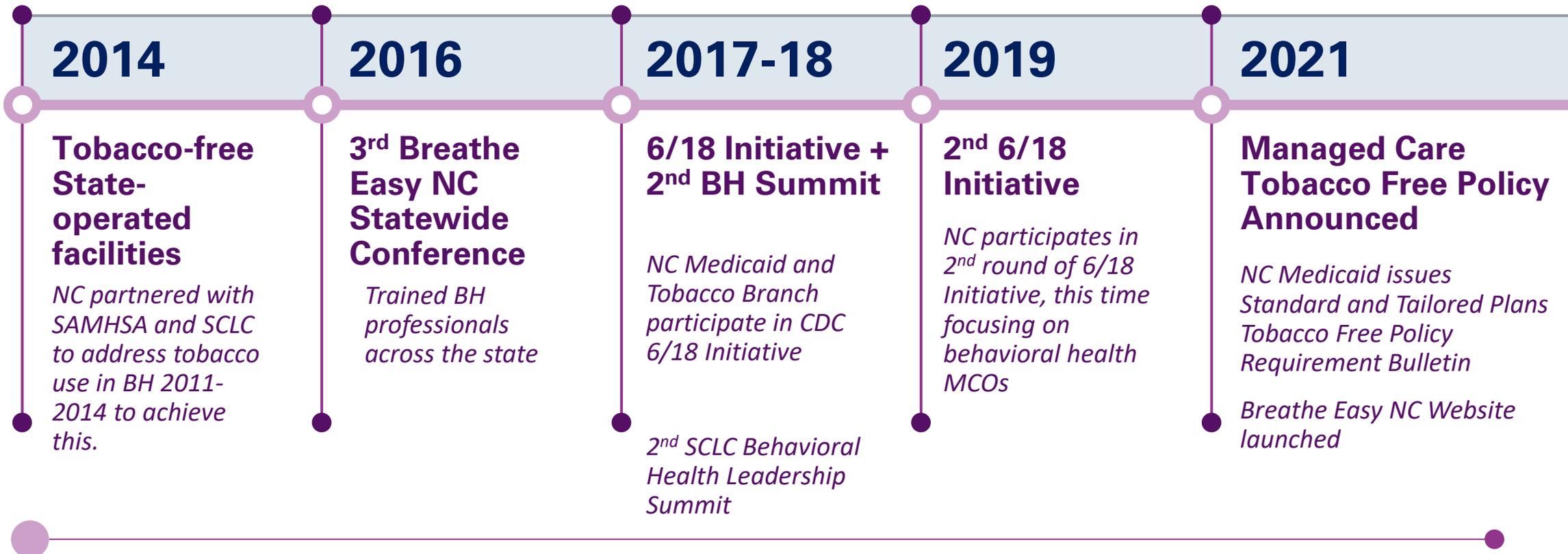
Tobacco use rates are high among mental health and substance use clients. Research shows treating tobacco addiction while addressing behavioral health and substance use is most effective, and many of these clients prefer to get tobacco cessation counseling and treatment from these trusted providers who are skilled in behavioral health and addiction treatment. There should be no wrong door for tobacco users who want to quit, and examples of resources for assistance with smoking cessation are medical offices, crisis centers and enhanced behavioral health services such as Assertive Community Treatment Teams.

BH providers could not bill for brief interventions in their settings until 2015

BreatheEasyNC

Becoming Tobacco Free

Partnership Timeline



Medicaid Managed Care

Contract language required one quitline vendor for the state; tobacco-free facilities of all providers contracting with MCOs with few exceptions; and tobacco treatment plans covering screening, standard of care treatment, promotion, and training,

Issued Medicaid communication bulletin about tobacco-free policy requirement to all providers one year + in advance, with technical assistance website: www.BreatheEasyNC.org

6/18 Initiative & SCLC BH Summits



Improved Medicaid coverage through Standard Plan Medicaid Managed Care RFP – 2017

Built on success to make more changes via Tailored Plan Medicaid Managed Care RFP and Standard Plan Amendments - 2019

Federal Match Relationship with Medicaid



NC was already partnering with Medicaid by using federal match funds to help pay for QuitlineNC services

Strong Local and State Partnerships

Change for Life: Tobacco-Free Recovery Coalition convened behavioral health partners committed to going tobacco-free. These partners mentored peer organizations, showing that this work can be done to state & local decision-makers.



Prior track record of success taking state-operated healthcare facilities tobacco-free and integrating treatment in 2014.



I didn't survive drugs and alcohol
so I could die from cancer.

I had to stop smoking.

—SELMA

Tobacco-Free Policy: Promoting the WHY

- Becoming 100% tobacco-free and offering tobacco dependence treatment aligns with organization's mission, vision of wellness.
- Link the policy to evidence-based treatment for mental health and substance use disorders, promoting whole person care.
- Tobacco-free policies are key to health equity, protecting everyone's right to clean air (check out [Frameworks Institute's Tobacco Disparities Project](#))

NORTH CAROLINA TOBACCO TREATMENT STANDARD OF CARE

[Click here for the full document](#)

FDA Approved Pharmacotherapy¹

12 weeks of varenicline (Chantix®)

or

12 weeks of combination therapy
(nicotine patches and nicotine gum or
nicotine lozenge)

Other pharmacotherapy includes bupropion,
nicotine nasal spray and nicotine inhaler



Evidenced-Based Counseling

In order of effectiveness:

- Face to face individual counseling
- Group counseling
- QuitlineNC – telephonic, texting,
and web-based counseling

100% TOBACCO FREE ENVIRONMENTS HELP PEOPLE QUIT.



A Coalition Evolves

Tobacco-Free
Behavioral
Health Summit
in Charlotte

November 2016

TF BH
Collaborative
started –
educational
topics
bimonthly

2017-2018

Focus groups &
thought leader
interviews of
BH
professionals

2018

Hosted Duke-UNC
TTS trainings at
Charlotte AHEC,
scholarships
provided for BH
staff; partnered
with Atrium &
Novant

2018 & 2019

Launched Senior
BH Leadership
Collective to lead
TF culture shift
with co-leads from
McLeod & Anuvia

April 2019

McLeod President
attended national
Behavioral Health
Network training
in Denver, CO

July 2019

- Mobilize Behavioral Health (BH) champions
- Training on best practice tobacco control strategies
- Awareness on drivers of tobacco disparities
- Raise voices - focus groups and surveys of BH professionals & those with lived experience
- Review of early adopter success & lessons learned / national-state partners

A Coalition Evolves

COVID-19 pandemic hit!

McLeod & Anuvia agree to “lock arms” and take their agencies 100% tobacco-free

Sept. 2019

Change for Life: Tobacco-Free Recovery theme, logo, messaging emerge

Fall 2019

McLeod Center Board of Directors adopt TF Campus policy

March 2020

UNCC / APHI - baseline data collection of McLeod staff surveys/ client interviews, TF policy readiness

Summer 2020

Change for Life webpages launch on County website

Fall 2020

- Pilot projects
- Engage public health/health informatics interns for evaluation/data projects
- Easy access to best practice resources
- Wellness Committees to drive change – engage staff on all levels
- Shared communications/positive messaging – words matter!

A Coalition Evolves



Expanded Change for Life: Tobacco-Free Recovery Coalition to 11-county area

January 2021

Road Map to Tobacco Free Organization Tool developed, with MCPH technical assistance provided

January (plus) 2021

Partnered with Second Harvest Food Bank (CVS donations) for free NRT to BH agencies

Spring 2021

NC Medicaid Policy Change: Tailored Plans will need to have TF Campus Policy/ link to treatment by December 2022

Spring 2021

Breathe Easy NC Becoming Tobacco-Free website launched

August 2021

- **When bottom up and top-down approaches align, it propels momentum**
- Access to quit medications is critical/ need NRT onsite
- Capacity building trainings
- **Therapeutic Opportunity** approach to policy adherence
- Peer influence – bold leadership

Region 4 Change for Life: Tobacco-Free Recovery Coalition - 2022 Meeting Schedule



The Region 4 Coalition will meet virtually on a monthly basis on the **4th Thursday from 8:30 – 9:45 am** (note holiday changes*) with educational topics of interest every month by subject experts.

A peer-facilitated breakout opportunity for sharing/problem solving will be provided each month – select from two smaller groups based on where your organization is on the tobacco-free journey: Group 1 - newcomers (those starting or early in the journey) and Group 2 - veterans or early adopters (those further down the road).

Meeting Structure: 1 hour, 15 minutes

8:30 am – Welcome/Announcements (5 minutes)

8:35 am – Educational Topic for the Month (30 minutes) – with Evidence-Based Information/Content Expert

9:05 am – Facilitated Break Out Rooms (25 minutes) – Learn From Each Other

9:30 – 9:45 am – Report Out and Wrap Up (15 minutes)



Planned Monthly Meeting Topics:

JANUARY 27

The Tobacco-Free Road Map – how to develop a comprehensive approach to change culture and provide whole person care

FEBRUARY 24

Communicating the Whys – how to gain leadership and staff buy-in to create a tobacco-free agency environment

MARCH 24

You Don't Have to Do this Alone!
Utilizing Quitline NC, Breathe Easy NC and Change for Life: Tobacco-Free Recovery and online resources



APRIL 28

How to Embrace a "Therapeutic Opportunity" Approach – a patient-centered way to deal with tobacco-free policy violations

MAY 26

Words Matter.
How to frame the story of tobacco-related health inequities around justice/fairness and collective solutions

JUNE 23

How Can We Be Reimbursed?
What we know about billing/coding for tobacco treatment services



ROAD TO TOBACCO-FREE – ROAD TO TOBACCO-FREE – ROAD TO TOBACCO-FREE –  **TOBACCO-FREE!**

JULY 28

Using Message Maps – How to create tobacco-free motivational messaging for clients, and staff, and other stakeholders

AUGUST 25

Implementing Clinical Processes for tobacco treatment using the Million Hearts Tobacco Cessation Change Package



SEPTEMBER 22

How to Know if You are on the Right Track - building in surveys/evaluation to assess your tobacco-free policy and treatment

OCTOBER 27

Preparing the TF Environment – how to refresh client/patient spaces to achieve creative shift to wellness!



NOVEMBER 17*

How to Create Strategies to Build and Ensure Sustainable Staff Training around your tobacco-free campus initiative

DECEMBER 15*

Celebrate our Successes!



TOBACCO-FREE RECOVERY

CHANGE FOR *life*

The people we *love* are worth **QUITTING** for.

QUITTING IS A JOURNEY.
HOPE • HEAL • CHANGE FOR LIFE



Change for Life: Tobacco Free Recovery is an initiative of Mecklenburg County Public Health in partnership with McLeod Addictive Disease Center and other community partners.

Change for Life: Tobacco-Free Recovery

[Mecklenburg County, NC](#) > [Health Department](#) > [Community Health Services](#) > [Tobacco-Free Mecklenburg](#) > [Tobacco-Free Behavioral Health](#)

- Tobacco-Free Mecklenburg
- Priority Populations
- Quitting Tobacco Use
- Region 4 Tobacco-Free Alliance
- Tobacco-Free Behavioral Health**
- Tobacco-Free Policy
- Youth Tobacco Prevention

Tobacco-Free Behavioral Health



Historically individuals with mental health or substance use disorders have been targeted by the tobacco industry and have had limited access to tobacco treatment and other proven tobacco reduction strategies, resulting in deep-rooted tobacco disparities. The *Change for Life* initiative aims to change this narrative.

Research shows that integrating tobacco-use treatment into behavioral health programs can boost chances of long-term recovery and improve mental health while dramatically reducing health risks and chronic disease. Tobacco-free campuses are also healthier for employees and visitors.

Change for Life: Tobacco-Free Recovery empowers behavioral health organizations to:

- Adopt and implement tobacco-free campus policies.
- Integrate best practice tobacco treatment into ongoing services.
- Employ shared messaging that supports a positive tobacco-free culture of care for clients and staff.

Helping patients quit and remain abstinent from smoking can result in a 25% increased likelihood of sustained recovery from the use of alcohol and other drugs. -- Prochaska et al, 2004

Best Practice Resources

Community Partners

People with Behavioral Health Disorders

Communication Tools

A Journey to Tobacco-free Recovery

Address

Mailing Address:

Mecklenburg County Public Health
249 Billingsley Road
Charlotte, NC 28211

Office Location:

Mecklenburg County Public Health
249 Billingsley Road
Charlotte, NC 28211

[MAP](#)

[HOW ARE WE DOING?](#)

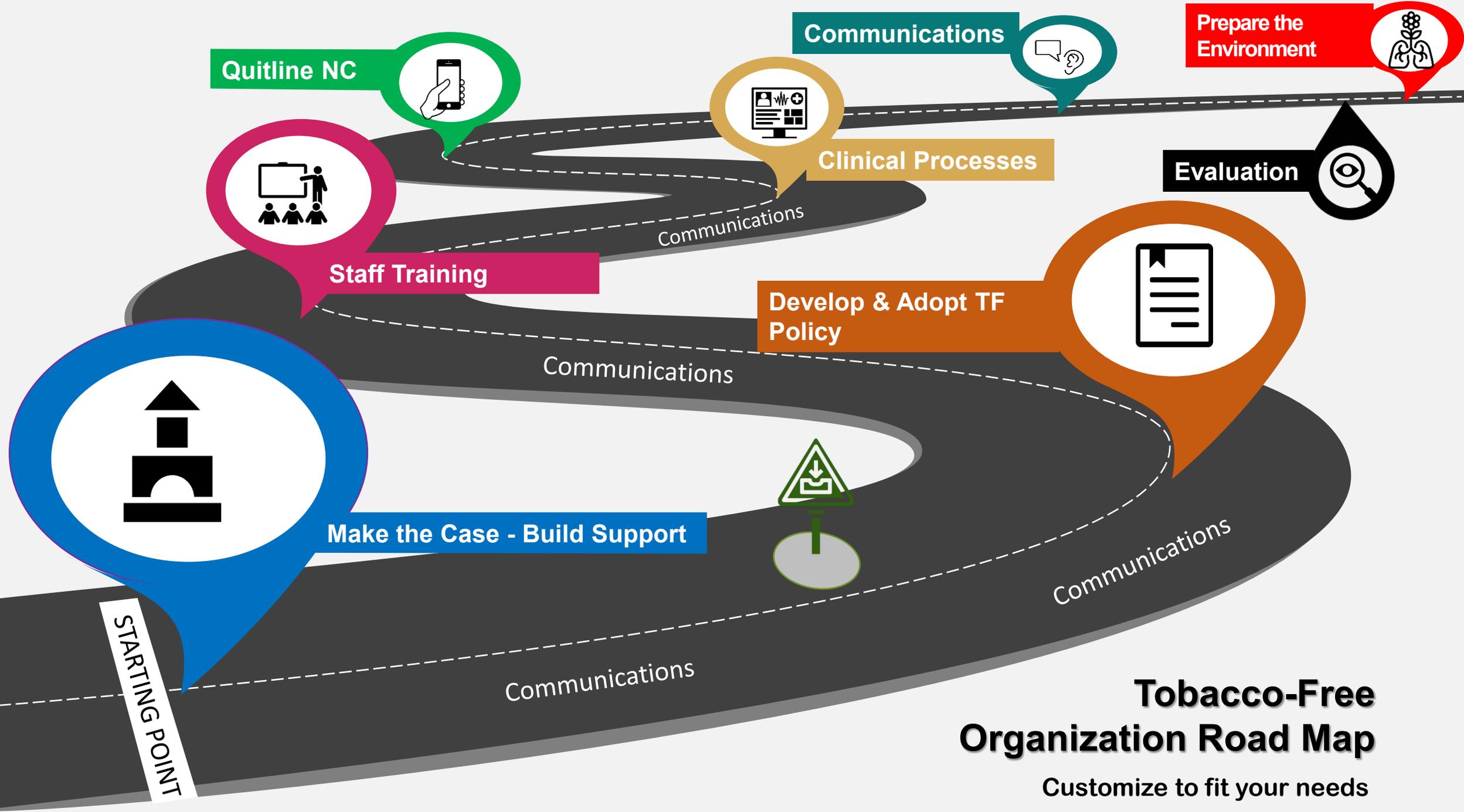
Hours: Mon-Fri 8 a.m. - 5 p.m.

Contact

Please do not send confidential information via email.

Web: TobaccoFree.MeckNC.Gov

Email: ChangeforLife@MeckNC.gov



Tobacco-Free Organization Road Map

Customize to fit your needs

Change for Life: Tobacco Free Recovery Coalition, Spring 2022

- McLeod Addictive Disease Center (Jan '21)
- Charlotte Rescue Mission (Jan / April '21)
- Anuvia Prevention and Treatment Center (June '21)
- Harmony Health Therapeutic Services, LLC (July '21)
- Greater Hickory Cooperative Christian Ministry (2020)
- Daymark (Jan / April '22)
- Hope Haven (August 2022)
- Genesis A Now Beginning (March 2022)
- Monarch
- Integrated Care of Hickory (April 2022)
- Catawba Valley Healthcare
- New Seasons
- The Cognitive Connection
- Crossroads
- Addiction Recovery Medicine Services (ARMS)
- Southern Family Medicine



- Public Health Departments – Region 4
- Atrium Health & Novant Health Systems
- Forge Communications
- American Heart Association
- Academy for Population Health Innovation
- Alliance Health (MCO)
- Partners Behavioral Health (MCO)
- Vaya (MCO)

* Tobacco Free Policy effective date

Environmental Supports

Tobacco-Free policy cards and other visuals to reinforce the policy and motivational messaging

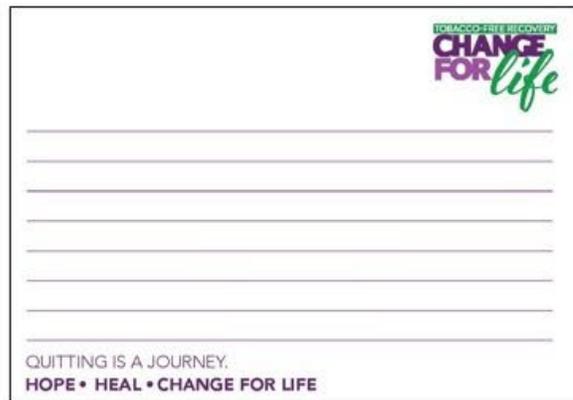
WELCOME TO OUR TOBACCO-FREE CAMPUS

For your health, tobacco use, including electronic cigarettes, will not be allowed anywhere on McLeod Center property, effective **January 1, 2021**.

THANK YOU FOR YOUR COOPERATION AND SUPPORT!

Becoming a tobacco-free campus is part of our work to support recovery and whole person care. Our team is here to help you with nicotine dependence treatment, or you can call **1-800-Quit-Now (1-800-784-8669)** or visit **QuitLineNC.com** for support, including free quit counseling and medications.

QUITTING IS A JOURNEY.
HOPE • HEAL • CHANGE FOR LIFE



McLeod Addictive Disease Center





Charlotte Rescue Mission

Rack Card – Professional Audience

TOBACCO-FREE RECOVERY

CHANGE FOR *life*

Engaging Behavioral
Health and Healthcare
Providers to:



Adopt and
implement
tobacco-free
campus policies



Integrate best
practice tobacco
treatment into
ongoing services



Utilize motivational
messaging with
a whole-person
care approach to
support a
tobacco-free
culture

Quitting is a Journey.
Hope. Heal. *Change for Life.*

ABOUT



Change for Life: Tobacco-Free Recovery Coalition is a community health initiative addressing the high rate of tobacco use and tobacco inequities prevalent in the behavioral health community.

Why this is important:

35-80%

tobacco use rates
among
the behavioral
health population
(depending on
diagnosis)

25%

improvement in
substance use
recovery when
tobacco
treatment is
integrated

60-70%

of patients with
behavioral health
conditions want
to quit tobacco
use

The path to success requires the collective support and actions of behavioral health agencies, allied health systems and community partners.

promoting
holistic
wellness

supporting
long-term
recovery

decreasing
the risk of
chronic disease

These are significant community health goals.

By integrating tobacco use treatment in behavioral health and healthcare settings, we are building a culture of health. Not only is this a more effective way to achieve sustained recovery, it enables people to live self-directed, happier and longer lives, and improving health is the right thing to do!

You don't have to do this alone.

The Change for Life: Tobacco-Free Recovery Coalition welcomes new partners to be a part of this journey. Contact us for more information.

704-614-7805

ChangeForLife@MeckNC.gov

TobaccoFree.MeckNC.gov

The Power of Collective Action – Change for Life Coalition

As of August 2022



20 – Behavioral Health Agencies Engaged



50 + Coalition Participants – table always open to all



1,800 – Behavioral Health Professionals Trained



9 - Agency-wide Tobacco-Free Policies adopted by community-based BH agencies



82,234 - Clients/Staff Impacted by Policy



“Do the
best you
can until
you know
better.
Then when
you know
better, do
better.”

- *Maya Angelou*

Key Tobacco Use Treatment Champions: RFP Process for Medicaid Managed Care

- 4 Medical Directors

- Dr. Carrie Brown- CMO of Division of Mental Health/Developmental Disabilities/Substance Abuse Services (DMH/DD/SAS)
- Dr. Keith McCoy- DMH/DD/SAS Senior Medical Advisor to CMO (for BH/IDD managed care plans)
- Dr. Shannon Dowler- CMO NC Medicaid
- Dr. Susan Kansagra- Chronic Disease and Injury Director

- Dr. Betsey Tilson- State Health Director

- Deputy Secretary Dave Richard- NC Medicaid

- Chief Deputy Secretary Kody Kinsley- NC DHHS

- Secretary Mandy Cohen- NC DHHS

Tobacco Cessation Plans

- (d) The BH I/DD Tailored Plan shall develop a comprehensive Tobacco Cessation Plan, which includes the Department's Quitline benefit, and a tobacco cessation program aimed at reducing tobacco use, including associated marketing strategies.
- (1) The program should at a minimum include the following strategies to reduce tobacco use across members
- i. Promote tobacco free campuses at contracted facilities;
 - ii. Ensure tobacco screening and treatment, including nicotine replacement and other appropriate medications, are provided to all relevant members in both inpatient, other facility-based, and outpatient/community settings;
 - iii. Ensure tobacco use/exposure needs are assessed and addressed in all relevant Care Plans/ISPs;
 - iv. Increase use of 99406 and 99407 CPT codes in all appropriate settings;
 - v. Use incentives for members and providers as allowed by the Contract;
 - vi. Use the specialized Behavioral Health Program for tobacco users with one or more BH conditions;
 - vii. Provider training; and
 - viii. A yearly report on efforts and outcomes.

- MCOs must:
 - create a tobacco cessation plan
 - Train care managers in brief interventions & standard of care
 - Screen all members and refer
 - Provide quitline services at the level defined by the state
- Quality measures for medical assistance with tobacco cessation for pregnant and non-pregnant adults



NC Standard & Tailored Plans Tobacco-Free Policy Requirement

Starting December 1, 2022, Standard and Tailored Prepaid Health Plans will require contracted medical, behavioral health, and some IDD/TBI organizations to provide a 100% tobacco-free campus.

Check out [NC Medicaid's Provider Memo](#) about this requirement.

NC Standard & Tailored Plans Tobacco-Related Policy Requirements

Provider owned/controlled programs which provide residential services or Intermediate Care Facilities for Individuals with Intellectual Disabilities services, which are subject to the Home and Community Based Services final rule, have a different set of requirements.

In these settings:

- Indoor use of tobacco products is prohibited.
- For outdoor areas of campus, providers shall:
- *ensure access to common outdoor space(s) that are free from exposure to tobacco products/use;*
AND
- *prohibit staff/employees from using tobacco products anywhere on campus.*

What does 100% Tobacco- Free Mean?

A tobacco-free policy applies to all of the property under the program's control (that you rent or own)

All of that property (buildings, grounds, and vehicles) is tobacco-free

Tobacco includes the use of combustible, electronic, heated, and smokeless tobacco products

No designated areas for tobacco use indoors or outdoors

Programs do not purchase, accept as donations, or distribute any tobacco products

Breathe Easy NC Advisory Committee

- Composed of diverse mental health, substance use, IDD/TBI service providers and people with lived experience
- Prioritized recruiting at least one provider member and one person with lived experience member who were members of NC Tribes
- Compensation available for people with lived experience who serve
- Consult with advisory committee members on educating clients and staff, addressing barriers to access treatment, and promoting quit attempts

Training

- Worked with AHEC, Addiction Professionals of NC, BH professional practice boards, statewide webinars, Governor's Institute
- [You Quit, Two Quit](#)- supports comprehensive tobacco use screening and cessation counseling for women of reproductive age, before, between, and beyond pregnancy.
- [Duke-UNC Tobacco Treatment Specialist Training Program](#)- Provided scholarships to healthcare providers that serve priority populations, created Breathe Easy NC One-Day intensive (held 3 times prior to Dec. 1st)
- Used MCOs to distribute training information, in addition to NC DHHS networks

SOR 2 and ARPA- NRT for Uninsured

- NC has not expanded Medicaid= large uninsured population

Partnered with NC DMH/DD/SAS on two programs:

- State Opioid Response 2 Grant (SOR 2)- Any MAT program that agreed to become 100% tobacco-free and integrate treatment received funding for
 - *NRT for uninsured people with OUD*
 - *1 AAP and 1 BH professional to go to Duke-UNC TTS Training*
 - *Technical assistance in tobacco use treatment integration and policy from health department*
- American Rescue Plan Act- Substance Abuse Block Grant funds-
 - Funding for MCOs to ensure inpatient and residential SUD programs have NRT on site for uninsured SUD clients

Breathe Easy NC website and Bulletin

- NC Medicaid released a [bulletin](#) advising all Medicaid providers of policy requirement in September 2021, updated January 2022 with new date
- Bulletin directed providers to a technical assistance website: BreatheEasyNC.org
- Website makes the case for tobacco-free campuses using Frameworks and ChangeLab Solutions- [Tobacco Disparities Framing guide](#)

BreatheEasyNC.org has:

- [FAQs](#) for medical, behavioral, and IDD/TBI providers
- [Training calendar](#)
- Evidence-based [treatment](#) and [policy information](#) with citations and links to resources
- [Sample policies, sample signage](#)
- Where to get HELP- [regional tobacco control staff](#)

Working with MCOs

Challenges

- Need to be prescriptive- MCOs have varying levels of experience with tobacco control
- Not every Medicaid provider is contracted with the plans
- Contract requirements are easier to change- it's not a law/regulation

Strengths

- Contracts are easier to put in place
- Tobacco-free is tied to funding
- Has a systemwide impact- Contract requirement is far-reaching: includes healthcare, MH, SUD, and some IDD/TBI
- If regulatory or legislative pathways are closed, with the right champions, this path is open

Working with MCOs

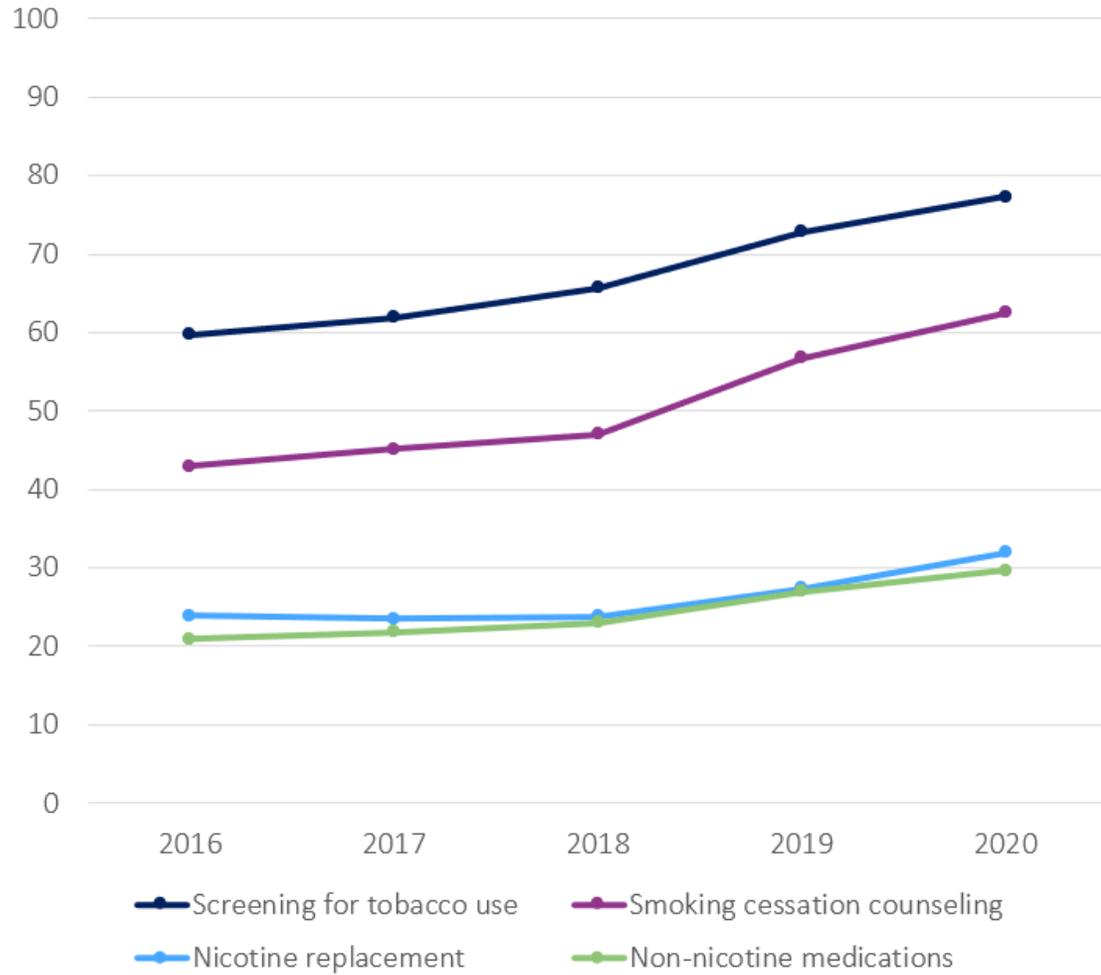
Best practices-

- Public health providing technical assistance across the state
- Provider meetings- let providers hear from PEERS
- Training- including encouraging MCO staff to attend Tobacco Treatment Specialist training
- Disseminating communication and website
- Health systems changes- including support for uninsured

NC Medicaid partners with NC DPH to review:

- Member education
- Member communications

Tobacco Treatment Integration:
NC SUD Treatment Facilities 2016-2020

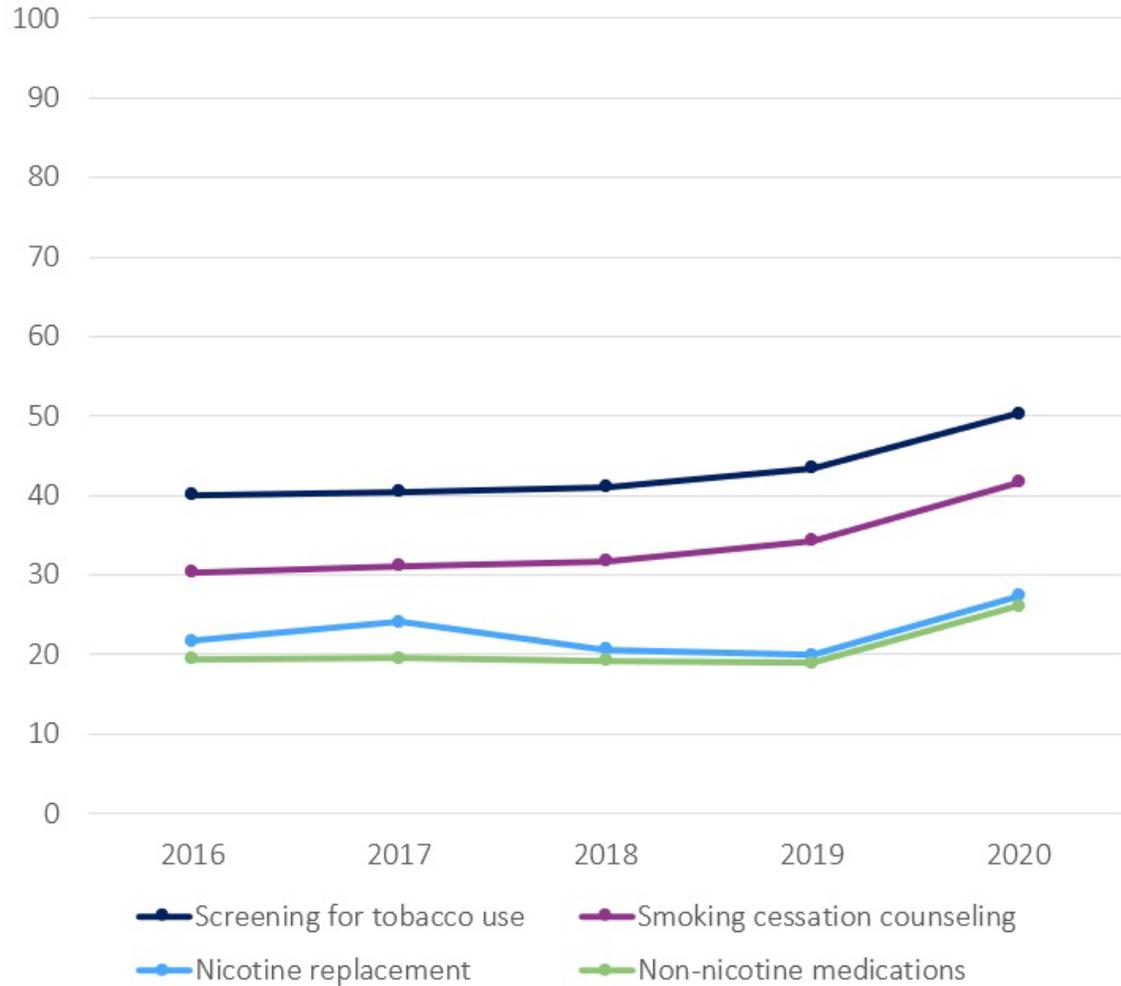


Smoke-free Campus Policies:
NC SUD Treatment Facilities 2016-2020

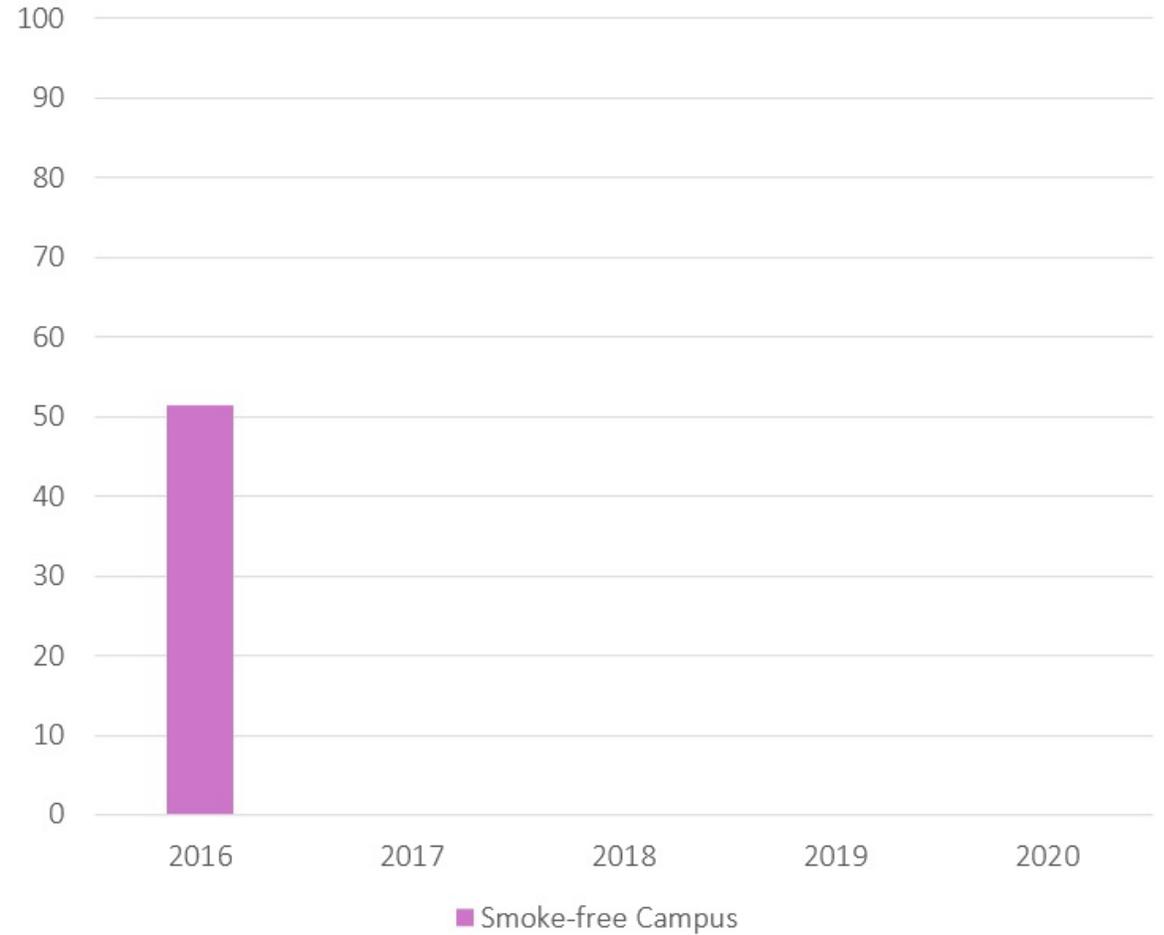


68.9% of facilities receive Medicaid, 37.3% receive state funds
Data from National Survey of Substance Abuse Treatment Services

Tobacco Treatment Integration:
NC Mental Health Facilities 2016-2020



Smoke-free Campus Policies:
NC Mental Health Facilities 2016-2020



93% of facilities receive Medicaid, 67.8% receive state funds
Data from National Mental Health Services Survey

Conclusion

- Since announcing the policy requirement, **100,000+** North Carolinians with BH conditions and staff are now protected from secondhand smoke where they receive care.
- That number will continue to increase as we pass the deadline of Dec. 1st, 2022
- NC will continue to monitor measures of treatment integration, policy, and quit attempts among people with BH conditions to evaluate the impact of the policy
- This is just the beginning of partnering with MCOs and internal partners in DHHS

Lesson learned:

**Build support from the bottom up AND the top down
by helping decision makers find their “why”**

Contact Information

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Q&A

- Submit questions via the **'Ask a Question' box**



CME/CEU Statements

Accreditations:

The University of California, San Francisco (UCSF) School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

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Course meets the qualifications for 1.25 hours of continuing education credit for **LMFTs, LCSWs, LPCCs, and/or LEPs** as required by the California Board of Behavioral Sciences. Provider # 64239.

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California Addiction Counselors: The UCSF Office of Continuing Medical Education is accredited by the **California Consortium of Addiction Professional and Programs (CCAPP)** to provide continuing education credit for California Addiction Counselors. UCSF designates this live, virtual activity, for a maximum of 1.25 CCAPP credits. Addiction counselors should claim only the credit commensurate with the extent of their participation in the activity. Provider number: 7-20-322-0722.



California
Behavioral Health
& Wellness Initiative

THE FUTURE LOOKS **BRIGHT**

Free CME/CEUs will be available for all eligible California providers, who joined this live activity thanks to the support of the California Tobacco Control Program (CTCP)

For our California residents, SCLC offers regional trainings, online education opportunities, and technical assistance for behavioral health agencies, providers, and the clients they serve throughout the state of California.

For technical assistance please contact (877) 509-3786 or Jessica.Safier@ucsf.edu.

Visit CABHWI.ucsf.edu for more information

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✓ Refer your clients to cessation services

Post Webinar Information

- You will receive the following in our post webinar email:
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 - ✓ PDF of the presentation slides
 - ✓ Instructions on how to claim FREE CME/CEUs
 - ✓ Information on certificates of attendance
 - ✓ Other resources as needed
- All of this information will be posted to our website at <https://SmokingCessationLeadership.ucsf.edu>





SCLC's next live webinar is on

Smoking cessation improves your mental health with Dr. Gemma Taylor, Epidemiologist, Head of Data Science and Analytics at HEOR, Honorary Reader at University of Bath

- **Thursday, September 8, 2022, 12:00 – 1:00 pm EDT**
- Registration will open soon

Contact us for free technical assistance



- **Visit** us online at smokingcessationleadership.ucsf.edu
- **Call** us toll-free at **877-509-3786**
- **Provide Feedback** - Copy and paste the post webinar survey link: https://ucsf.co1.qualtrics.com/jfe/form/SV_3DIIP5ViwqfLNBQ into your browser to complete the evaluation!

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