Tobacco Cessation Toolkit
For Providers

SMOKE-free
Get help quitting tobacco

MDwise.org/wellness/smokefree
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Introduction

Smoking causes an enormous burden on public health. While policy measures to control tobacco use are being applied across the USA, inadequate attention has been given to what health care professionals can do in their routine work with patients. This toolkit is intended to help the health care professional in offering effective interventions for tobacco cessation to patients during office visits. Health professionals are uniquely suited to the task of providing effective tobacco cessation advice and support to patients who smoke or otherwise use tobacco products.

Smoking and tobacco use continues to be a leading contributor to chronic health issues and preventable death. It is especially evident in the state of Indiana. In 2013, the Commissioner of the Indiana State Department of Health (ISDH) shared the following statistics:

- In health rankings, Indiana ranks 41st least healthy out of 50 states.
- Indiana has the sixth highest smoking rate in the U.S.
- 15.7 percent of pregnant mothers smoke (2013).
- 26 percent of Medicaid mothers smoke (2013).

ISDH has identified the top health priorities for the State of Indiana for 2013–2017 as:

1. Reducing Infant Mortality
   b. Smoking by pregnant women is a leading cause of low birth weight and preterm births, both of which impact infant death prior to age one.
   c. Indiana’s infant mortality rate in 2013 was 7.1 per 1,000.

2. Reduction in Obesity

3. Reduction in Adult Smoking

It often takes as many as seven to 10 attempts before a person is successful at quitting tobacco use. This may become frustrating for both patients and providers. It often takes time and repetition to quit for life.

Direction from a trusted medical provider is powerful. When patients receive advice from their doctor, it is more influential than when they hear it from other sources. We hope the resources in this toolkit will be helpful to providers in advising tobacco users to quit.
Best Practices for Treating Tobacco Use and Dependence

The MDwise medical benefit covers smoking cessation services for HIP and Hoosier Healthwise members in the form of tobacco cessation counseling services. These services, in coordination with pharmacotherapy that is available under the Indiana Medicaid FFS pharmacy benefit program, can be very effective in helping MDwise members to quit smoking.

The Public Health Service of the United States Department of Health and Human Services developed best practice guidelines for providers in assessing tobacco users and rendering effective tobacco dependence interventions**. The guidelines encourage providers to utilize the “5 A’s” model for treating tobacco use and dependence:

<table>
<thead>
<tr>
<th>Ask</th>
<th>Advise</th>
<th>Assess</th>
<th>Assist</th>
<th>Arrange</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ask about and document tobacco use status of every MDwise member at every visit.</td>
<td>In a clear, strong and personalized manner urge every MDwise member who is a tobacco user to quit.</td>
<td>• For current tobacco users, is the user willing to make a quit attempt at this time? • For the ex-tobacco user, how recently did the member quit and are there any challenges to remaining abstinent?</td>
<td>• For the MDwise member willing to make a quit attempt, offer medication and provide or refer for counseling or additional behavioral treatment to help the member quit. • For members unwilling to quit at this time, provide motivational interventions designed to increase future quit attempts. • For the recent quitter and any with remaining challenges, provide relapse prevention.</td>
<td>All MDwise members receiving the previous A’s should receive follow-up</td>
</tr>
</tbody>
</table>

The guidelines identify 10 key findings that MDwise providers should consider:

1. **Tobacco dependence is a chronic disease often requiring repeated intervention and multiple attempts to quit.** However, effective treatments exist that can significantly increase rates of long-term abstinence.
2. **MDwise providers and delivery systems should consistently identify and document tobacco use status and treat every tobacco user seen in a healthcare setting at every visit.**
3. **Tobacco dependence treatments are effective for all MDwise patient populations.** MDwise providers should encourage every patient willing to make a quit attempt to use the recommended counseling treatments and medications.
4. **Brief tobacco dependence treatment is effective.** MDwise providers should offer every patient who uses tobacco at least the brief treatments shown to be effective.
5. **While counseling and medication are effective by themselves, they are more effective used in combination.**

**The guidelines encourage providers to utilize the “5 A’s” model for treating tobacco use and dependence:**

- **ASK** Do you currently use tobacco?
- **YES**
- **NO**

- **ADVISE** to Quit
- **ASK** Have you ever used tobacco?
- **YES**
- **NO**

- **ASSESS** Are you willing to quit now?
- **YES**
- **NO**

- **ASSESS** Have you recently quit? Any challenges?
- **YES**
- **NO**

- **ASSIST** Provide appropriate tobacco dependence treatments
- **ASSIST** Intervene to increase motivation to quit
- **ASSIST** Provide relapse prevention
- **ASSIST** Encourage continued abstinence

**ARRANGE FOLLOWUP**

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4. **Brief tobacco dependence treatment is effective.** MDwise providers should offer every patient who uses tobacco at least the brief treatments shown to be effective.
5. **While counseling and medication are effective by themselves, they are more effective used in combination.**
6. Individual, group and telephone counseling are effective and their effectiveness increases with treatment intensity. Two components of counseling are especially effective:

Practical Counseling (problem solving/skills training)
- Recognize what events, internal states, or activities increase the risk of smoking or relapse.
- Identify and practice coping or problem-solving skills to cope with situations that increase risk of smoking and relapse.
- Provide the basic information about smoking, its harmfulness, and about successful quitting.

Social Support Delivered as Part of Treatment
- Encourage quit attempts.
- Communicate care and concern. Encourage the patient to talk about the quit attempt.

7. There are several effective medications for tobacco dependence treatment. MDwise providers should promote their use by all patients attempting to quit smoking, except when medically contraindicated. The Indiana Medicaid Pharmacy Benefit program currently provides up to 12 weeks in a calendar year of smoking cessation drug therapies.

<table>
<thead>
<tr>
<th>Medication</th>
<th>Cautions/Warnings</th>
<th>Side Effects</th>
<th>Dosage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bupropion SR 150</td>
<td>Not for use if the MDwise member:</td>
<td>Insomnia, Dry Mouth</td>
<td>Days 1-3: 150mg daily (AM)</td>
</tr>
<tr>
<td></td>
<td>• Currently uses MAO inhibitors</td>
<td></td>
<td>Days 4-end: 150mg BID</td>
</tr>
<tr>
<td></td>
<td>• Uses bupropion in any other form</td>
<td></td>
<td>Start 1-2 weeks before quit date. Prescription Only</td>
</tr>
<tr>
<td></td>
<td>• Has a history of seizures</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Has a history of eating disorders</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nicotine Gum</td>
<td>Caution with dentures</td>
<td>Mouth soreness, Stomach ache</td>
<td>1 piece every 1-2 hours (6-15 pieces/day)</td>
</tr>
<tr>
<td></td>
<td>• Do not eat or drink 15 minutes before or during use</td>
<td></td>
<td>2mg if &lt;24 cigs/day, 4mg if &gt;24 cigs/day</td>
</tr>
<tr>
<td>Nicotine Inhaler</td>
<td>May irritate mouth/throat at onset but improves with</td>
<td>Local irritation of</td>
<td>6-16 cartridges/day (90 Inhalations/cart)</td>
</tr>
<tr>
<td></td>
<td>use</td>
<td>mouth and throat</td>
<td></td>
</tr>
<tr>
<td>Nicotine Lozenge</td>
<td>Do not eat or drink 15 minutes before or during use</td>
<td>Hiccups, Cough, Heartburn</td>
<td>Weeks 1-6: 1 lozenge q 1-2hrs</td>
</tr>
<tr>
<td>(2mg or 4mg)</td>
<td>• One lozenge at a time</td>
<td></td>
<td>Weeks 7-9: 1 lozenge q 2-4hrs</td>
</tr>
<tr>
<td></td>
<td>• Limit 20 lozenges in 24 hours</td>
<td></td>
<td>Weeks 10-12: 1 lozenge q 4-8hrs</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>If smoke &gt;30 min after waking - 2mg</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>If smoke &lt; 30 min after waking – 4mg</td>
</tr>
<tr>
<td>Nicotine Nasal Spray</td>
<td>Not for patients with asthma</td>
<td>Nasal irritation</td>
<td>1 squirt per nostril = 1 dose</td>
</tr>
<tr>
<td></td>
<td>• May irritate nose (improves over time)</td>
<td></td>
<td>1-2 doses per hour, 8-40 doses per day</td>
</tr>
<tr>
<td></td>
<td>• May cause dependence</td>
<td></td>
<td>DO NOT INHALE</td>
</tr>
<tr>
<td>Nicotine Patch</td>
<td>Do not use if you have severe eczema or psoriasis</td>
<td>Local skin reaction, Insomnia</td>
<td>One patch per day</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>If &gt; 10 cigs/day, then 21mg for 4 weeks,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>then 14mg for 2-4 weeks, then 7mg for 2-4 weeks,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>then 7mg for 2-4 weeks</td>
</tr>
<tr>
<td>Varenicline</td>
<td>Use with caution if the MDwise member:</td>
<td>Nausea, Insomnia, Vivid/Strange dreams</td>
<td>Days 1-3, 0.5mg q AM</td>
</tr>
<tr>
<td></td>
<td>• Has significant renal impairment</td>
<td></td>
<td>Days 4-7, 0.5mg BID</td>
</tr>
<tr>
<td></td>
<td>• Has serious psychiatric illness</td>
<td></td>
<td>Days 8-end, 1mg BID</td>
</tr>
<tr>
<td></td>
<td>• Undergoes dialysis</td>
<td></td>
<td>Start 1 week before quit date</td>
</tr>
</tbody>
</table>

8. Telephone QUITLINE counseling is effective! Offer it to your MDwise members (ages 13 and over) interested in quitting. Effective January 2013, in addition to adult counseling, the Indiana Tobacco Quitline serves young tobacco users with a phone counseling program specifically designed for youth ages 13 to 17 that are ready to quit. Resources include age-appropriate educational materials and additional phone help with unlimited access to a toll-free support line 24/7.***

Contact your Provider Relations Representative to become a preferred provider and refer members via fax by using the form on the MDwise website at www.mdwise.org/hoosierhealthwise/providers/docs/qi-enroll.pdf.

The QUITLINE number is 1-800 QUIT NOW / 1-800-784-8669

9. For MDwise members unwilling to make a quit attempt, motivational strategies should be used to address the risks of continued tobacco use, the rewards to stopping tobacco use, and the roadblocks to quitting. These interventions should be repeated every medical visit.

10. Treating tobacco dependence is both clinically effective and cost-effective.

**Treating Tobacco Use and Dependence: 2008 Update, a Public Health Service-sponsored Clinical Practice Guideline
***Indiana Tobacco Quitline. IN.gov. 2015
The Hoosier Healthwise and Healthy Indiana Plans have come together to issue:

■ THIS IMPORTANT MESSAGE ■

Primary care providers can make a difference – help stop smoking!

Ask just two simple questions, every visit:

- Do you smoke?
- Do you want help to quit?

Reinforcement Every Visit is Important because:

- Patients’ lives change – they may be ready to quit today.
- Smokers who quit often try several times before they are successful.
- Tobacco dependence is a chronic disease - repeated interventions may be needed.

As a Primary Care Provider, you can make a difference in tobacco use!

Evidence Supports:

- Cessation counseling has been shown as effective as pharmacotherapy alone.
- Cessation counseling coupled with prescribed cessation aids has dynamic benefits.
- Quit rates improve when prescribed cessation aids are coupled with Quitline counseling.
- The Indiana Tobacco Quitline is a free and confidential source for printed materials and telephonic cessation counseling. Patients can be referred directly at 800 QUIT-NOW, or indiana.tobacco.quitline.net, or HHW and HIP members may call their HHW or HIP Plan to get connected.

Reminder: Medicaid covers tobacco cessation medications including over the counter products and some instances of tobacco use cessation counseling.

Refer to Clinical Best Practice Guideline by U.S. Department of Health and Human Services, Public Health Service, April 2008
http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/tobacco/clinicians/update/index.html
Tobacco Cessation Counseling/Billing

- Providers are encouraged to screen, advise and counsel at every visit.
- Medicaid reimburses for tobacco cessation treatment services rendered by the following licensed practitioners participating in the IHCP:
  - Physician
  - Physician’s assistant
  - Nurse practitioner
  - Pharmacist
  - Psychologist
  - Registered nurse
  - Dentist
- Certain provider types must bill under supervising practitioner’s NPI number.
- Medicaid reimburses one 12-week course of tobacco cessation treatment per member per calendar year.
- Prior authorization is not required for tobacco cessation products or counseling.
- Treatment may include prescription of any combination of tobacco cessation products and counseling.
- One billed unit of counseling is 15 minutes of service. Providers should not round up to the nearest 15 minutes.
  - Providers must perform counseling for a minimum of 30 minutes (two units) and a maximum of 150 minutes (10 units) within the 12 weeks.
  - Providers must bill counseling in 15-minute increments.

For complete billing information please refer to the IHCP Provider Manual chapter 8, section 4, page 8-302 – 8-303.
Nicotine Replacement Treatments (NRT)

Medicaid covers several options to make quitting a little easier for those who wish to do so. Preferred agents include Bupropion SR 150 as well as nicotine replacement therapy options including Commit lozenges, Nicoderm, Nicorette, nicotine gum, and nicotine patches. The nicotine replacement therapy options are also all available over-the-counter. For MDwise Marketplace members, preferred agents include bupropion SR 150, Chantix, Nicotrol® inhaler and Nicotrol® nasal spray. Other nicotine replacement options are available to Marketplace members for purchase over-the-counter.

Bupropion is a good option to decrease the desire for smoking, while the nicotine replacement therapy options are good for gradually decreasing nicotine use, especially for those in whom bupropion would have drug interactions or contraindications.

Chantix is also an option for those who meet the set prior authorization criteria for that drug. In order to meet the requirements, patients must be at least 18 years of age, must have had less than 12 weeks of tobacco cessation therapy in the last 365 days, and may not currently have an active claim for nicotine replacement therapy.

Non-preferred agents include Nicorelief, Nicotrol NS, Nicotrol inhaler, and Zyban.

The Use of NRT in Pregnant Women

Smoking during pregnancy has been associated with a number of negative consequences for both the baby and the mother. These consequences include low birth weight, perinatal mortality, preterm birth, ectopic pregnancy, and decreased maternal thyroid function. Pregnant women should be strongly advised to quit smoking and, ideally, pregnant women should stop smoking without the use of pharmacotherapy as it can be harmful to the fetus. Current pharmacotherapy options include nicotine replacement therapy (NRT), Chantix, and Zyban. Nicotine products are classified as pregnancy category D while the other two options are classified as pregnancy category C.

There is often question as to whether NRT can be used during pregnancy if a woman is unable to quit smoking on her own. Currently, there is not enough evidence to conclude that NRT increases the rate of smoking cessation during pregnancy, and nicotine is thought to have harmful effects on the fetus. It is, however, presumed to be safer than smoking, and if a woman is unable to quit smoking without pharmacotherapy, NRT products can be considered with great caution and consult from the woman’s health care provider. The FDA has issued a warning on all over-the-counter NRT products stating, “If you are pregnant or breastfeeding, only use this medicine on the advice of your health care provider. Smoking can seriously harm your child. Try to stop smoking without using any nicotine replacement medicine. This medicine is believed to be safer than smoking. However, the risks to your child from this medicine are not fully known.”

If NRT therapy is chosen, intermittent products such as the gum or the lozenge are preferred during pregnancy due to the lower daily dose of nicotine. If the patch is selected, patches should be removed while the woman is sleeping.
Provider Resources for Tobacco Cessation

American Cancer Society—Guide to Quitting Smoking
cancer.org/healthy/stayawayfromtobacco/guidetoquittingsmoking

American Heart Association
heart.org/HEARTORG/GettingHealthy/QuitSmoking/Quit-Smoking_UCM_001085_SubHomePage.jsp

American Lung Association—Indiana
lung.org/stop-smoking

Centers for Disease Control and Prevention (CDC)
cdc.gov/tobacco/data_statistics/fact_sheets/cessation/quitting

Indiana Tobacco Quitline
in.gov/quitline
or
quitnowindiana.com
  • Link to order Quitline materials
    in.gov/quitline/2338.htm

MDwise Tobacco Cessation Toolkit
MDwise.org/providers/smokefree

Quitline Fax Forms and Additional SMOKE-free Resources
MDwise.org/providers/smokefree

The Help You Need to Quit Smoking MDwise Member Brochure
MDwise.org/MediaLibraries/MDwise/Files/Health%20and%20Wellness/HelpYouNeedToQuitSmoking.pdf

Tobacco Cessation MDwise Member Brochure
MDwise.org/MediaLibraries/MDwise/Files/Health%20and%20Wellness/smoking_cessation_brochure.pdf

Promoting Smokefree Pregnancies in Indiana (PSPI) Toolkit
MDwise.org/MediaLibraries/MDwise/Files/For%20Providers/Tools%20and%20Resources/SMOKE-free%20Resources/PSPI_toolkit.pdf
PROVIDER INFORMATION

Clinic Name

Health Care Provider

Address

City State Zip County

I am HIPAA-Covered Entity (check one)  ■ Yes  ■ No  ■ I Don’t Know

Fax (____) ______ - _____ Phone (____) ______ - _____ email ____________________________

Comments __________________________________________

PATIENT INFORMATION

Gender  ■ Male  ■ Female  Pregnant?  ■ Yes  ■ No

Patient Name______________________________________________ Date of Birth ___/___/____

Address___________________________________________________________________________________

City State Zip County

Primary Phone# (____) _____ - _____ TYPE ■ Home ■ Work ■ Cell ■ Other

Secondary Phone# (____) _____ - _____ TYPE ■ Home ■ Work ■ Cell ■ Other

Language Preference (check one)  ■ English  ■ Spanish  ■ Other___________________________

Tobacco Type (check all that apply)  ■ Cigarettes  ■ Smokeless Tobacco  ■ Cigar  ■ Pipe

I am ready to quit tobacco and request the Indiana Tobacco Quitline contact me to help me with my quit plan.

(Initial) I do not give my permission to the Indiana Tobacco Quitline to leave a message when contacting me.

Patient Signature __________________________________________

The Indiana Tobacco Quitline will call you. Please check the BEST 3-hour time frame for them to reach you.

Note: The Quitline is open 7 days a week; call attempts over a weekend may be made at times other than the selected 3-hour time frame.

■ 6am-9am  ■ 9am-12pm  ■ 12pm-3pm  ■ 3pm-6pm  ■ 6pm-9pm

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Confidentiality Notice: This facsimile contains confidential information. If you have received this facsimile in error, please notify the sender immediately by telephone and confidentially dispose of the material. Do not review, disclose, copy, or distribute.
### Materials Order Form

The following materials are available to your organization for FREE. Simply choose the materials that your organization will distribute, specify the quantity, and TPC will send your order within one to two weeks. All materials are also available to be downloaded from [www.indianaquitline.net](http://www.indianaquitline.net). For requests exceeding the maximum amount, please contact TPC.

<table>
<thead>
<tr>
<th>Smoking, Asthma and Your Kids</th>
<th>Break Free From Tobacco</th>
<th>Libérese del Tabaco</th>
<th>Baby Love</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rack Card</td>
<td>General brochure</td>
<td>General brochure (spanish)</td>
<td>Pregnancy brochure</td>
</tr>
<tr>
<td>QTY____ Max. 200/month</td>
<td>QTY____ Max. 200/month</td>
<td>QTY____ Max. 200/month</td>
<td>QTY____ Max. 200/month</td>
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<thead>
<tr>
<th>Amando a su Bebé</th>
<th>Control Your Diabetes</th>
<th>Controle Su Diabetes</th>
<th>Pregnancy Poster</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregnancy brochure (spanish)</td>
<td>General brochure</td>
<td>General brochure (spanish)</td>
<td>12’x18’</td>
</tr>
<tr>
<td>QTY____ Max. 200/month</td>
<td>QTY____ Max. 200/month</td>
<td>QTY____ Max. 200/month</td>
<td>QTY____ Max. 25/month</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>QUIT NOW Cards</th>
<th>QUIT NOW Cards</th>
</tr>
</thead>
<tbody>
<tr>
<td>business cards</td>
<td>business cards (spanish)</td>
</tr>
<tr>
<td>QTY____ Max. 300/month</td>
<td>QTY____ Max. 200/month</td>
</tr>
</tbody>
</table>

**THIS SECTION FOR HEALTH CARE PROVIDERS**

<table>
<thead>
<tr>
<th>Prescription Pads</th>
<th>Fax Referral Form</th>
<th>Tobacco Treatment Resource Guide</th>
<th>Preferred Provider Enrollment Form</th>
<th>Tobacco Cessation Guidelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>25 sheet tear pad</td>
<td>For Providers</td>
<td>Resource Guide with Pharmacotherapy Chart</td>
<td>QTY____ Max. 200/month</td>
<td>Step by Step for Providers</td>
</tr>
<tr>
<td>QTY____ Max. 50 pads/month</td>
<td>QTY____ Max. 50 pads/month</td>
<td>QTY____ Max. 200/month</td>
<td>QTY____ Max. 200/month</td>
<td></td>
</tr>
</tbody>
</table>

**Mail to**

Name ____________________________
Organization ______________________
Address __________________________
City, State, Zip ____________________
County ___________________________
Phone/Email _______________________

**Fax form to TPC**

Attn: Barb Cole
Fax Number: 317.234.1786

For more information call Barb Cole at 317.234.1787.
The following materials are available to your organization for FREE. Simply choose the materials that your organization will distribute, specify the quantity, and TPC will send your order within one to two weeks. All materials are also available to be downloaded from www.Indianaquitline.net. For requests exceeding the maximum amount, please contact TPC.

Web Coach® and Text2Quit®

Materials Order Form

Web Coach® and Text2Quit®
Palm Card
QTY_____ Max. 200/month

Web Coach® and Text2Quit®
Rack Card
QTY_____ Max. 200/month

Web Coach® and Text2Quit®
General brochure
QTY_____ Max. 25/month

Web Coach® and Text2Quit®
Business cards
QTY_____ Max. 300/month

No Excuses Poster
11"x17"
QTY_____ Max. 25/month

Mail to
Name __________________________________________________________
Organization _____________________________________________________
Address __________________________________________________________
City, State, Zip __________________________________________________
County __________________________________________________________
Phone/Email _____________________________________________________

Fax form to TPC
Attn: Barb Cole
Fax Number: 317.234.1786

For more information call Barb Cole at 317.234.1787.
Patient Resources

All patient materials are available at MDwise.org/wellness/smokefree in both English and Spanish.
Printed brochures for MDwise members are available through your MDwise provider relations representative.

DO YOU SMOKE OR USE TOBACCO?

DO YOU WANT TO QUIT?

Get help kicking the tobacco addiction.

MDwise.org/wellness/smokefree
Are You Ready to Quit?
Tobacco products contain a highly addictive drug called nicotine. This is what keeps tobacco users coming back for more and continuing their addiction. It is hard to break an addiction.

Ask yourself these questions to decide whether you are ready to quit:
• Do I plan to quit smoking or using tobacco in the next month?
• Have I already made a few small changes in my behavior?
• Do I plan to quit smoking or using tobacco in the next six months?

If you answer yes to any of these questions you may be ready to get started.

Reasons to Quit
There are many reasons to quit smoking. Here are some examples:
1. Secondhand smoke is bad for your children or other family members to breathe. It can really hurt those who have asthma.
2. It causes diseases like cancer, heart disease, stroke and Chronic Obstructive Pulmonary Disease (COPD). These are sometimes fatal.
3. It is expensive. Did you know that a person who smokes a pack of cigarettes each day spends about $180 each month or $2,160 each year?
4. A smoke smell will be left on your clothing and your belongings.
5. Smoking is not allowed in most public places.

Did you know that Indiana has one of the highest smoking rates among pregnant women in the USA? If you are pregnant, it is twice as important that you try to quit. Here are reasons why:
• It can increase the risk of miscarriage.
• Your baby can be born too early or too small.
• Your baby can have learning and/or behavior problems.
• Your baby can develop breathing problems.
• It may increase the chance of infant death before the age of one.
• Your baby may be born addicted to nicotine.
How to Quit

If you are ready you can get help to quit tobacco. Talk to your doctor. Your doctor can help you find the plan that is right for you. You’ll need to decide on a quit date and stick to it. Sometimes it takes several tries before you are able to quit for good. Don’t get discouraged. Find a support program. Social support helps when you are trying to quit.

MDwise covers the following treatments (with some limits):

- Gum
- Patch
- Lozenge
- Nasal Spray
- Inhaler
- Prescription medication
- Individual and group counseling

MDwiseREWARDS

If you smoke or use tobacco you can earn points for trying to quit. To earn points, you must complete a cessation program. Examples include:

- Indiana’s Tobacco Quitline
- Baby and Me Tobacco Free
- A program through your hospital or clinic

Ask your doctor about the programs he/she recommends. Once completed, ask for a certificate or letter of completion. Then send a copy to MDwise by mail, fax or email to get your points. Send to:

MDwiseREWARDS
P.O. Box 441423
Indianapolis, IN 46244
Fax (toll-free): 1-844-759-8551.
Email: rewards@mdwise.org.
Helpful Resources

MDwise has helpful resources and information available online at MDwise.org/wellness/smokefree.

You can also call the Indiana Tobacco Quitline. It is a free phone-based counseling service. It helps Indiana tobacco users quit. Call 1-800-QUIT-NOW (1-800-784-8669) 24 hours a day, seven days a week. They can talk to you and coach you through quitting. You can also go to quitnowindiana.com for more information.
Tips to Help You and Your Family Become SMOKE-free

• Talk to your doctor about quitting. Support and guidance from your doctor increases your chances of quitting.

• It is normal to try more than one time to stop smoking. Don’t be discouraged.

• If one way of quitting smoking does not work, try another way. It may work better.

• When you decide that you want to quit, set a quit date. If possible, it should be within two weeks. Tell all of your family, friends and coworkers of your plans to quit. Ask for their support.

• Remove all cigarettes from your home, car and workplace. Avoid smoking in these places for two weeks before your quit date.

• On your quit date, it is best to stop totally. Do not have even a single puff of a cigarette.

• Plan ahead for times when you would normally smoke. Some examples are: work breaks, morning coffee, or a trip to work.

• Know how to deal with cravings when they happen. Try drinking water or breathing deeply. Cravings usually last only a few minutes.

• Have a supply of nicotine replacement therapy (such as nicotine gum) on hand at all times. This will help you to when you are tempted to have a cigarette.

• Talk about your progress or problems. Talk to family, friends and your pharmacist or doctor.

• Have regular contact with health care professionals. Buy your nicotine replacement products weekly at the pharmacy. This may help you quit.

• If you still find it hard to quit, your doctor may be able to prescribe medicine to help.

• For further advice and support, call Indiana’s Tobacco Quitline at 1-800-QUIT-NOW (1-800-784-8669).

Sources:
Accessed November 3, 2015

Accessed November 3, 2015
The Dangers of Secondhand Smoke

What is secondhand smoke?
Secondhand smoke is the smoke that escapes from the end of a lit cigarette. It also comes from cigars or pipes. It also is
the smoke that is blown out by the smoker. This smoke has nicotine and harmful chemicals. It affects everyone around
the smoker.

Why is it dangerous?
It causes cancer and other diseases. Secondhand smoke can cause lung cancer. It is also connected to breast cancer, brain
tumors, leukemia and other cancers. Secondhand smoke can cause other diseases like asthma, heart disease and stroke.
Thousands of people die each year because of secondhand smoke.

Is it dangerous to smoke around children?
Yes! Secondhand smoke can cause lung and ear infections and more severe asthma in babies and children. Secondhand smoke
increases the risk of sudden infant death syndrome (SIDS) in children. Pregnant women should never be around secondhand
smoke. It can lead to miscarriage or low birth-weight babies.

How much is too much?
There is NO safe level of exposure to secondhand smoke. Any exposure is too much.

What can I do to protect my family?
The best thing you can do is to not allow smoking in your home and car. Make sure you and your children are not exposed
to secondhand smoke when you visit friends and family. Opening windows, running fans or using air filters is not enough.
This won’t prevent the dangers of secondhand smoke.

Sources:
Accessed November 4, 2015
Accessed November 4, 2015
Accessed November 4, 2015