

# Objective 7: Motivate and Help Tobacco Users to Quit

To quit tobacco use, tobacco users need encouragement, support, and the proper resources. To motivate quit attempts and improve quit success rates, offer evidence-based, culturally appropriate resources, including Food and Drug Administration (FDA)-approved nicotine replacement therapies/medications and behavioral counseling. Special attention should be paid to priority populations who face barriers in accessing help with quitting tobacco use.

## Key Concepts:

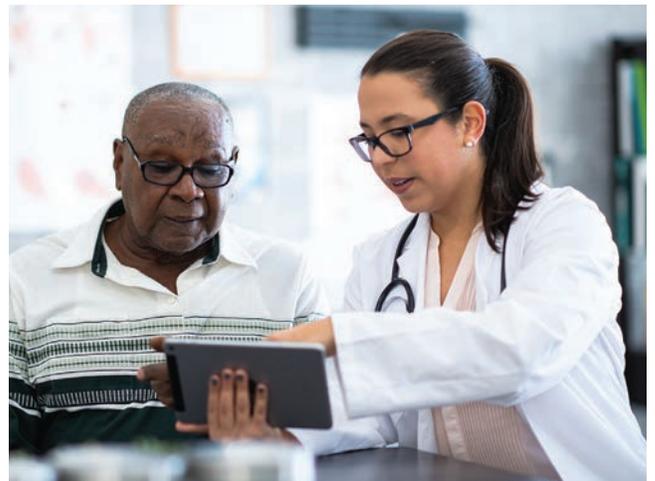
Evidence shows that insurance coverage for smoking cessation treatment that is comprehensive, barrier-free, and widely promoted increases the use of these treatment services, leads to higher rates of successful quitting, and is cost-effective.<sup>34</sup>

The California Medi-Cal program, which is run by the Department of Health Care Services, offers a strong opportunity to increase cessation attempts and reduce tobacco-related disparities. Medi-Cal covers half of the state's smokers, all of whom are low-income, and many of whom belong to other priority populations as well. Every time a health professional sees a patient, it is an opportunity to identify tobacco users, encourage them to quit, and help drive cessation success.

There is also significant opportunity to promote tobacco cessation with community partners such as pharmacists, social service providers, and other non-traditional health partners. Including cessation messaging during policy campaigns helps communities adjust to stronger tobacco laws.

## Key Themes

- Include cessation support when advancing local tobacco policy and promote tobacco cessation.
- Counter tobacco industry strategies that delay cessation.
- Collaborate with Medi-Cal and others in population health approaches to tobacco cessation.



# Strategies:

## Policy

- Require Medi-Cal and its managed care plans to provide, promote, and operationalize a complete set of cessation benefits that includes access to FDA approved and culturally tailored nicotine replacement therapies/ medications as well as behavioral counseling.
- Include tobacco cessation support based on culturally tailored cessation research in all tobacco control and prevention efforts.
- Assess all patients for tobacco and cannabis use.
- Establish and require the use of electronic health records (EHR) systems to collect accurate data on patients' use of tobacco and cannabis.
- Make all California patient-care facilities tobacco-free, including mental health and substance-use disorder treatment facilities.
- Require all insurance plans to cover FDA-approved cessation nicotine replacement therapies/ medications and behavioral counseling.
- Make cessation resources a part of policy and enforcement messaging (i.e., in communications about local ordinances and in signage).



## Research

- **Monitor the use of cessation resources, treatment utilization, and number of quit attempts, and make sure resources are reaching priority populations.**
- **Support research to determine effective strategies to help youth quit both conventional tobacco products and e-cigarettes.**
- **Support research to find the most effective therapies that help dual users of cigarettes, e-cigarettes, and cannabis to quit.**
- **Support exploratory research on effective cessation strategies for emerging tobacco and cannabis products.**

## Education

- Include cessation training in all medical and nursing school programs and make it freely available for continuing education credits for health professionals.
- Make tobacco cessation training available for various levels of cessation interventions (e.g., screening and brief intervention, tobacco treatment specialist).
- Promote Kick It California and educate people who use and refer to Kick it California about its various service options (e.g. chat, text, app, self-help materials, etc.).
- Use media—including social media—to encourage quit attempts and increase use of Kick It California and related resources.

## Funding

- Contract with Kick It California to provide nicotine replacement therapies/medications and incentives for Medi-Cal or other health plan members to quit.
- Fund more research into ways to increase quit attempts, quit intents, and relapse prevention.

## Action

- Promote quit attempts at multiple levels, including community, population, provider, health care system, etc.
- Make tobacco treatment specialist (TTS) training available statewide so that health care and behavioral health systems can acquire the skills necessary to offer behavioral counseling services.
- Produce and distribute culturally appropriate cessation educational materials for priority populations.
- Adapt cessation services for e-cigarette users from evidence-based cessation strategies for cigarette smokers.

## Partnerships

- Encourage partnerships with social services like 211 call centers to reach priority populations and disseminate cessation information and connect people to cessation services.
- Work with health plans and employers to provide incentives for members and employees to quit tobacco.
- Partner with managers from multi-unit housing that have implemented tobacco-free policies to promote cessation resources to tenants.



Source: Kick It CA