

Strategies for Employers to Help Employees Who Want to Quit Using Tobacco

Using your company's health plan to help employees and their families quit using tobacco

Research shows that the most effective tobacco dependence treatment includes medication(s) and coaching/counseling—this combination can double or triple the employee's chances of quitting successfully. Businesses that have included a tobacco dependence treatment benefit in their health plan report that this coverage has reduced total tobacco consumption, increased the number of tobacco users willing to undergo treatment, increased productivity and increased the percentage of those who successfully quit.

Below are common tobacco dependence treatment benefits and guidelines. Compare what you now spend on tobacco-related illnesses and lost productivity with the cost of providing effective tobacco cessation services for employees.

Are tobacco dependence treatment health benefits cost-effective?

- Tobacco cessation is more cost-effective than most other common and covered disease prevention interventions, such as treatment of hypertension and high cholesterol.
- It costs between 10 and 40 cents per member per month to provide a comprehensive tobacco dependence treatment benefit (costs vary based on utilization and dependent coverage).
- Employees who smoke have a high average insured payment for health care—\$1,145 vs. \$762 for nonsmokers.

Questions to ask when purchasing health insurance for your employees

- How does the health plan identify/document tobacco users and tobacco cessation interventions?
- Covered tobacco dependence treatment drugs. How frequently offered, and for what period annually? Multiple medications covered? Multiple quit attempts covered in one 12-month period?
- What type of counseling (e.g., in person, online, telephone) is covered? How often is counseling covered annually and for what period (e.g., 90 days twice per year)?
- Is co-pay in line with other medications in the plan?
- Are over-the-counter medications (nicotine patch, gum, lozenge) covered? Is there a co-pay?
- Who is eligible for tobacco cessation benefits/drugs/counseling? Does this include all covered individuals or only those with a drug benefit?
- What other educational or counseling materials are provided (e.g., hard copy, online, other)?
- How does the plan motivate healthcare providers to provide tobacco cessation (bonuses)?
- Are tobacco dependence treatment benefits promoted to the employees? How?
- How is the percentage of tobacco users who have received treatment assessed? How is the success of the tobacco cessation initiatives evaluated?

Health benefit design

Effective tobacco dependence treatment benefits address the following:

- Pay for counseling and medications.
- Offer the FDA-approved medications, including prescription and over-the-counter.
- Cover counseling services, including telephone and individual counseling.

Show your employees you want to help them quit tobacco by designing a benefit that makes it easier for them.

- Eliminate co-payments or require employees to pay no more than the standard co-payment. Tobacco users rarely use cessation services inappropriately, and are much more likely to attempt to quit when no co-payment is required. Utilization averages 3 to 8% of tobacco users per year.
- Provide at least two courses of treatment—both medication and counseling—per year. Tobacco dependence is a chronic disease. Relapse is part of the process.

Tobacco dependence treatment medications

Prescription:

- Chantix (varenicline)
- Zyban/Wellbutrin (bupropion SR 150)
- Nicotine inhaler
- Nicotine nasal spray

Over the counter:

- Nicotine gum
- Nicotine lozenge
- Nicotine patch (can also be prescription)

Support for employees who use tobacco

The effect of implementing a tobacco-free policy will be most immediate for employees who use tobacco. Tobacco cessation assistance and support will help employees adjust to behavioral and physical changes. Although 70% of smokers indicate they would like to quit smoking, not all smokers will make a serious attempt to quit at the same time and not all tobacco users will respond to the same program for quitting. Because of this diversity, there should be options available for employees. In order to build support it is also important to educate your non-tobacco-using employees.

Tobacco dependence treatment options

The most successful and highest recommended treatment option is physician/healthcare provider support and monitoring along with medication and counseling.

1. **Healthcare Provider Counseling:** Healthcare providers play a critical role in tobacco treatment by counseling patients about tobacco addiction, monitoring their progress, providing information about medications and following up to reduce relapse.
2. **Medications:** Nicotine replacement therapies, as well as bupropion SR and varenicline help the tobacco user fight the physical addiction. Most products are available by prescription; the nicotine patch, gum and lozenge are available over-the-counter.
3. **Wisconsin Tobacco Quit Line; 800-QUIT-NOW:** The Quit Line provides information on quitting tobacco use, one-on-one, practical counseling on how to increase the chance for success and referrals to local quit smoking programs and services. All services are free and confidential.
4. **Wisconsin Community Resource Guide for local services (by county):**
<http://www.medicine.wisc.edu/quitline/programs/>

Support for employers wanting assistance

The American Lung Association in Wisconsin also offers resources for employers to assist smokers who wish to quit. These include group and online versions of our premiere smoking cessation program, *Freedom From Smoking®*; a customized cessation program for teens called *Not On Tobacco (N-O-T)*, and our free *Lung HelpLine*, offering telephone counseling by registered nurses and respiratory therapists.

For information on all of the Lung Association cessation programs and services, visit www.lungwi.org or call 1-800-LUNG-USA (586-4872).