



HUMAN
SERVICES
DEPARTMENT



CENTENNIAL CARE 2.0 TOBACCO PREVENTION AND CESSATION SERVICES
KATHY LEYBA, BUREAU CHIEF, QUALITY
SEPTEMBER 21, 2021
MEDICAL ASSISTANCE DIVISION

INVESTING FOR TOMORROW, DELIVERING TODAY.

BEFORE WE START...

On behalf of all colleagues at the Human Services Department, we humbly acknowledge we are on the unceded ancestral lands of the original peoples of the Apache, Navajo and Pueblo past and present.

With gratitude we pay our respects to the land, the people and the communities that have contributed to what today is known as the State of New Mexico.



PHOTO COURTESY: HSD Employee



MISSION

To transform lives. Working with our partners, we design and deliver innovative, high quality health and human services that improve the security and promote independence for New Mexicans in their communities.

GOALS



We help NEW MEXICANS

1. Improve the value and range of services we provide to ensure that every qualified New Mexican receives timely and accurate benefits.



We communicate EFFECTIVELY

2. Create effective, transparent communication to enhance the public trust.



We make access EASIER

3. Successfully implement technology to give customers and staff the best and most convenient access to services and information.



We support EACH OTHER

4. Promote an environment of mutual respect, trust and open communication to grow and reach our professional goals.



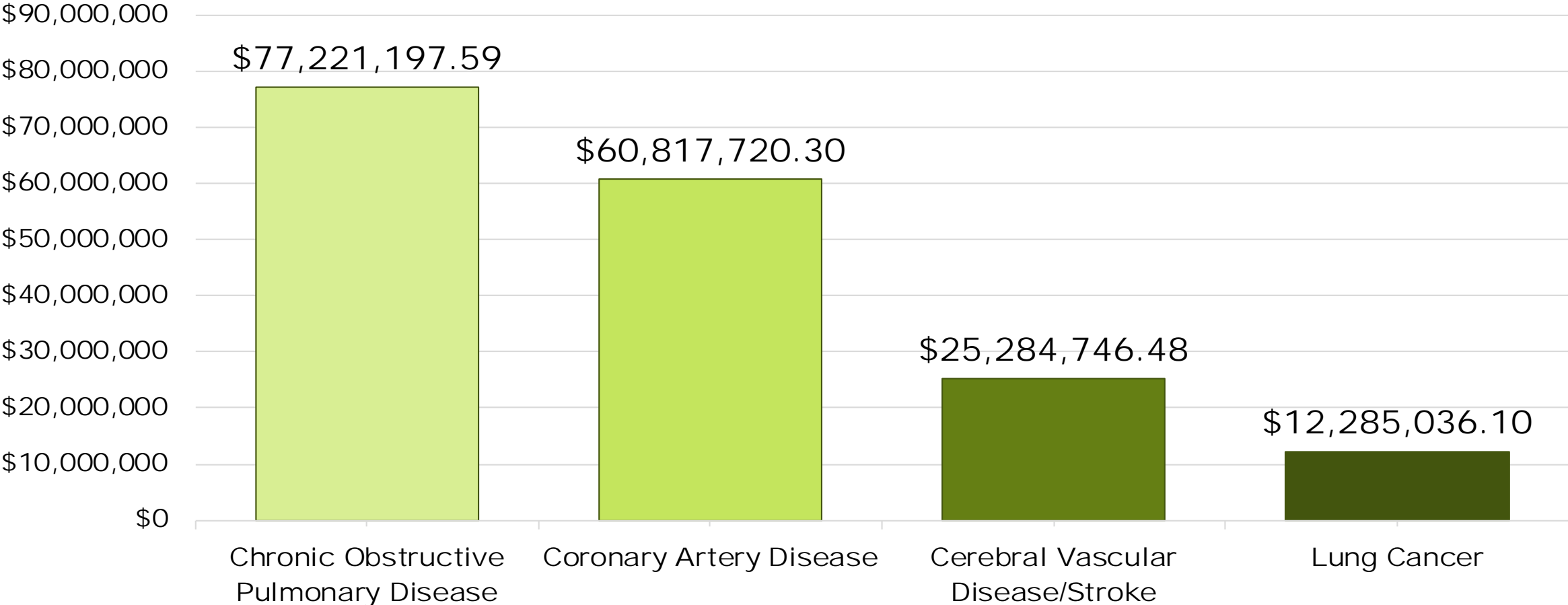
FY21 MEDICAID APPROPRIATION

Investing for tomorrow, delivering today.

FY21 MEDICAID APPROPRIATION

Program Area	FY22 Appropriation
Breast and Cervical Cancer Treatment Program	\$1,255,400
Medicaid Programs including cessation and treatment of smoking related illness or disease	\$6,063,900
TOTAL appropriation for Medicaid from the Tobacco Settlement Program Fund	\$7,319,300

ESTIMATED SPEND BY MANAGED CARE ORGANIZATIONS ON SMOKING RELATED ILLNESS OR DISEASE IN 2020



FY22 MEDICAID APPROPRIATION

Investing for tomorrow, delivering today.

FY22 MEDICAID APPROPRIATION

Program Area	FY22 Appropriation	Projected Spend
Breast and Cervical Cancer Treatment Program	\$860,800	Projected to spend 100%
Medicaid Programs including cessation and treatment of smoking related illness or disease	\$4,500,800	Projected to spend 100%
TOTAL appropriation for Medicaid from the Tobacco Settlement Program Fund	\$5,361,600	Projected to spend 100%

- FY23 transfer revenue: \$8,846,272

MEDICAID PROGRAMS AND SERVICES

Investing for tomorrow, delivering today.

AVAILABLE MEDICAID SERVICES AND TREATMENTS

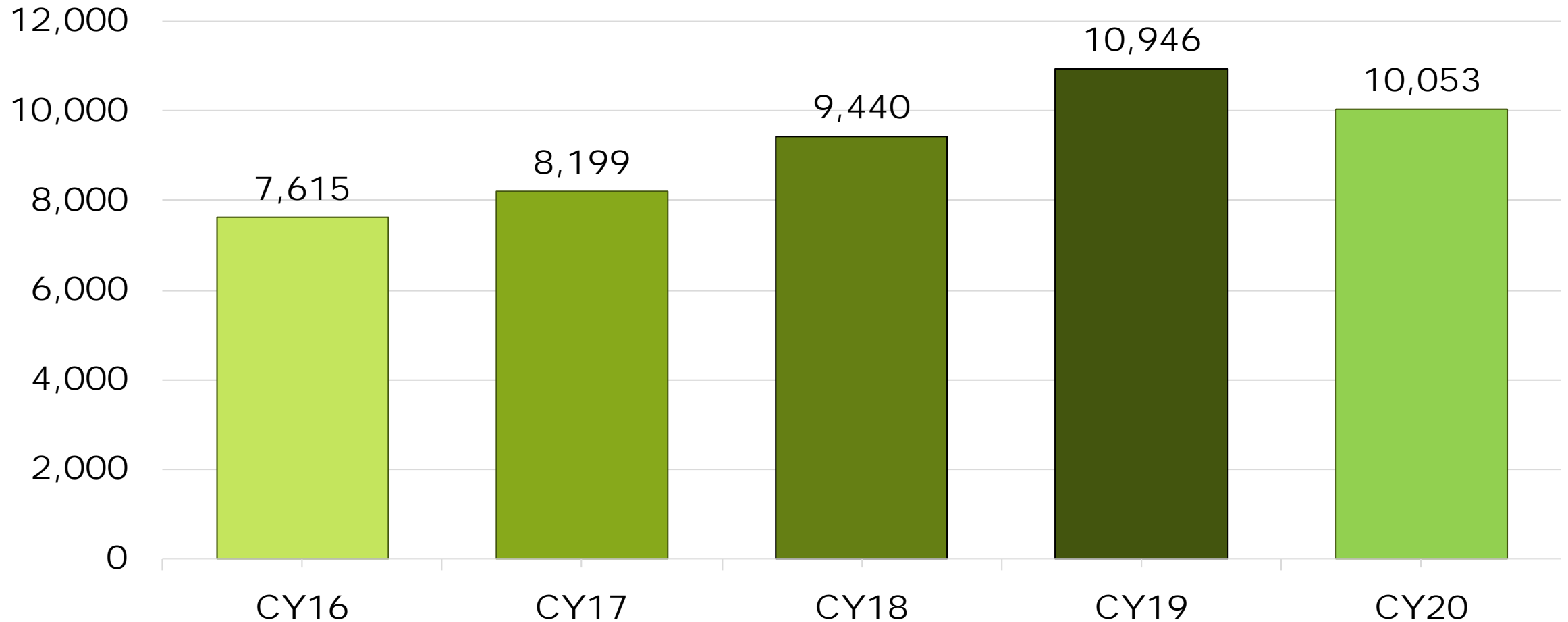
Services

- Cessation Quit Line
- Counseling Services
 - Individual
 - Group
 - Telephonic

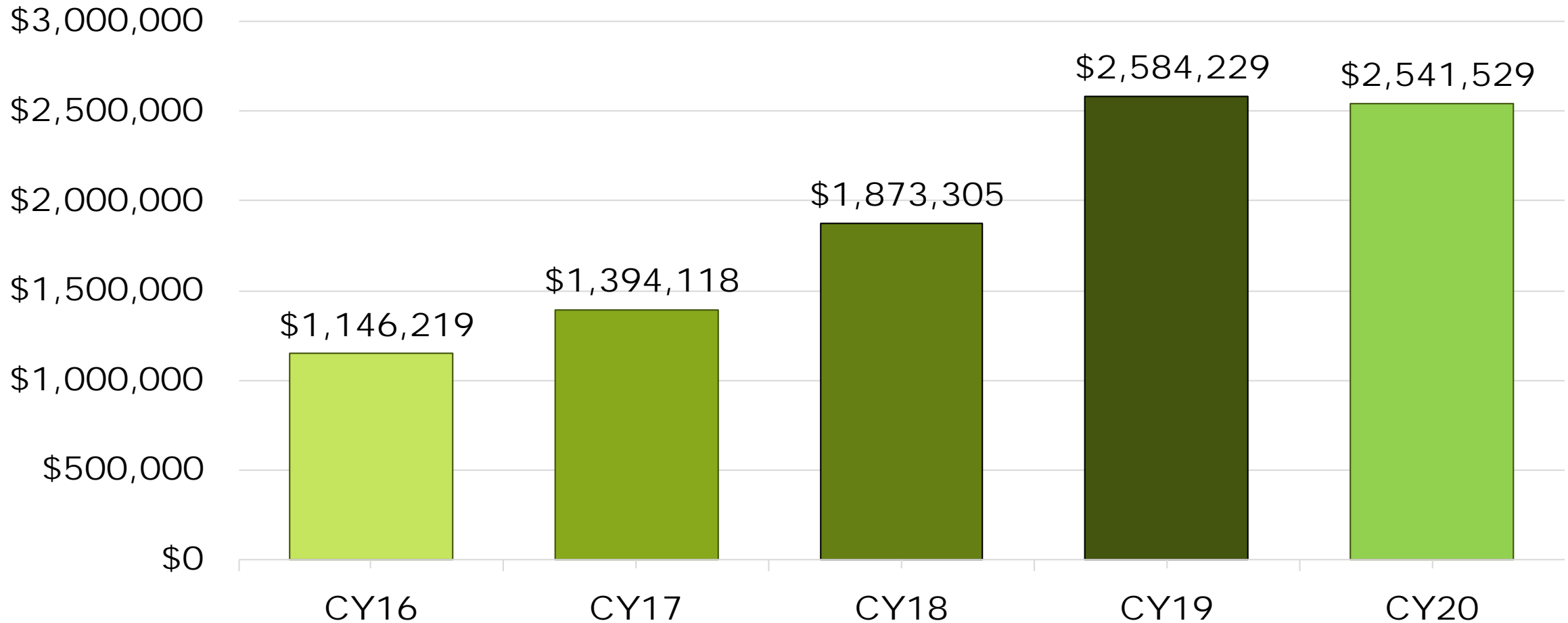
Treatment Products

- Nicotine Gum, Patch, Inhaler, Lozenge and Nasal Spray
- Zyban
- Chantix
- Wellbutrin
- Bupropion SR

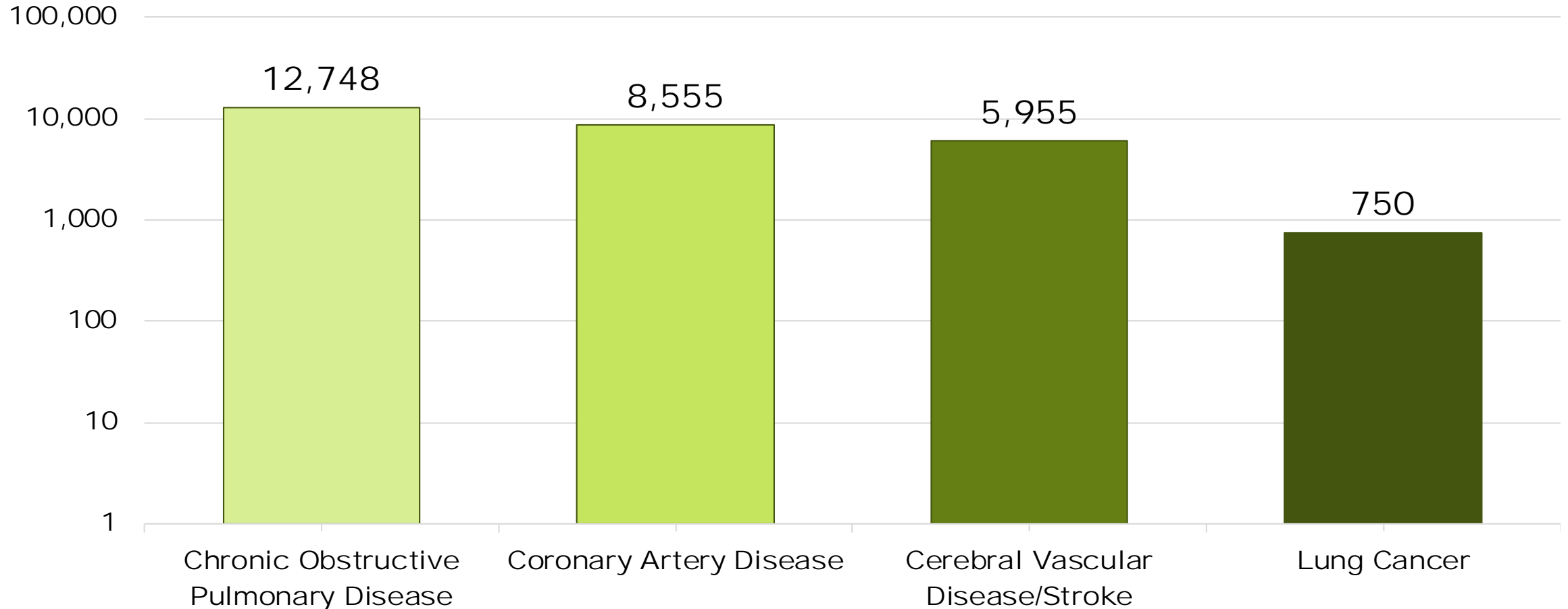
NUMBER OF MEMBERS RECEIVING SMOKING/TOBACCO CESSATION PRODUCTS/SERVICES



MCO TOTAL DOLLAR AMOUNT SPENT ANNUALLY FOR SMOKING/TOBACCO CESSATION PRODUCTS/SERVICES



ESTIMATED NUMBER OF UNIQUE CENTENNIAL CARE MEMBERS DIAGNOSED WITH SMOKING RELATED ILLNESS OR DISEASE IN 2020



CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) FAST FACTS AND SCIENTIFIC EVIDENCE ON SMOKING

- Over \$300 billion in health care spending and productivity losses are attributed to cigarette smoking
- For every person who dies from smoking in the US, at least 30 people live with a serious smoking-related illness
- In 2019 an estimated 34.1 million adults in the US smoked cigarettes
- In 2019 37.5% of New Mexico high school youth reported using any tobacco products including e-cigarettes

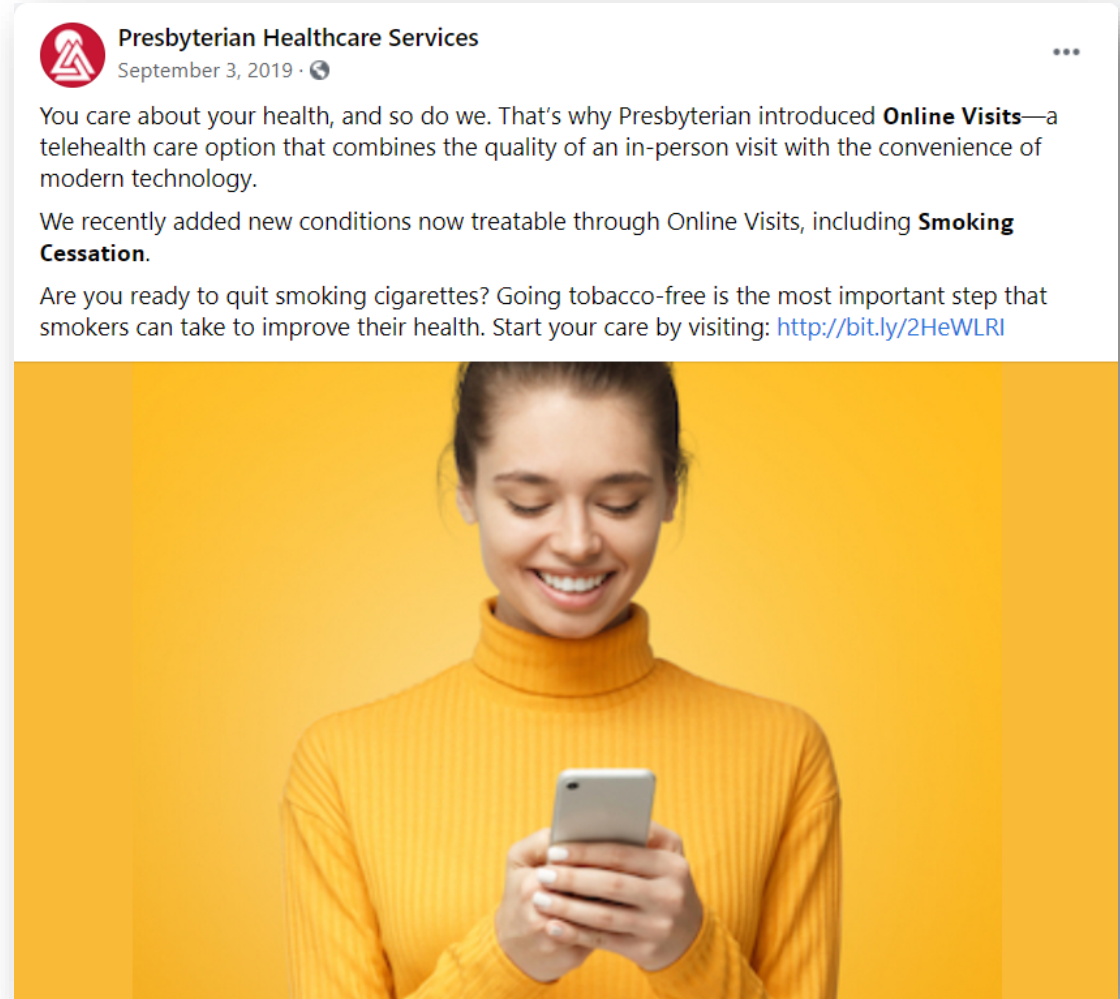
AMERICAN LUNG ASSOCIATION

FAST FACTS AND SCIENTIFIC EVIDENCE ON SMOKING

- The smoking rate in New Mexico is 15.2% and is ranked 20th among all states.
- Recent research suggests that if 1% of current smokers in New Mexico quit smoking, the state would save \$23.7 million Medicaid costs the following year.
- The Medicaid population smokes at a rate almost 2.5% higher than the private insurance population. This leads to disease and premature death and cost the Medicaid program approximately \$39.6 million dollars per year.
- The Affordable Care Act requires all Medicaid enrollees to have access to cessation medication and counseling.

MANAGED CARE ORGANIZATION SMOKING CESSATION INITIATIVES

- Communication/Education
 - Promotion of cessation benefits in provider and member newsletter articles
 - Online resources providing information on the health impact of tobacco use and tips for quitting and helping others to quit
 - Educational materials provided to members such as quitting aids and quit guides to help the member decide what type, dose and duration of medications work best for them
 - Comprehensive Needs Assessments and Prenatal Assessments address the importance of smoking cessation, as well as the risk associated with secondhand smoke
 - Initiation of a Social Media Campaign that includes tailored messages for Facebook, Instagram and LinkedIn platforms



MANAGED CARE ORGANIZATION SMOKING CESSATION INITIATIVES

- Benefits/Services
 - Care Coordination programs include health promotion targeting tobacco use in members
 - Telephonic outreach to members identified as receiving nicotine replacement products to offer enrollment in a tobacco cessation program
 - Assist members in the development of smoking cessation plan of care
 - Individual and Group Therapy sessions
 - Pharmacotherapy Benefits to help members reduce nicotine withdrawal symptoms, negative mood states and block pleasure experienced from tobacco use

MANAGED CARE ORGANIZATION SMOKING CESSATION INITIATIVES

- Tools
 - Text messaging support to help members quit, such as coaching, motivational and educational reminders
 - Smoke free Smartphone applications assist members in monitoring progress, earning incentives for reaching milestones, and provide tools to help manage cravings



QuitGuide

QuitGuide is a free app that helps you understand your smoking patterns and build the skills needed to become and stay smokefree.

EXPANDED HSD INITIATIVES

- MCOs must monitor and report the use of smoking cessation products and counseling utilization on a quarterly basis
- MCOs must operate a tobacco cessation program
- MCOs must provide **barrier free access** to cessation products and counseling through
 - Eliminating prior authorization requirements for nicotine replacement therapies
 - Ensuring no limits on length of treatment or quit attempts per year
 - Eliminating step therapy requirements
 - Encouraging but not requiring members to enroll in counseling to receive cessation products

BREAST AND CERVICAL CANCER PROGRAM

- Individuals enroll with Department of Health (DOH) Breast and Cervical Cancer (BCC) early detection program
- DOH determines qualification for Category of Eligibility (COE) 052 and the Income Support Division (ISD) processes the application if a diagnosis is made, and treatment is required
- As of August 2021, there were approximately 124 individuals receiving treatment