NC Tobacco Prevention and Control 2008

NC IOM Prevention Task Force

May 8, 2008

Sally Herndon Malek, MPH
NC Division of Public Health
Tobacco Prevention and Control Branch

HISTORIC OPPORTUNITIES FOR IMPROVED HEALTH

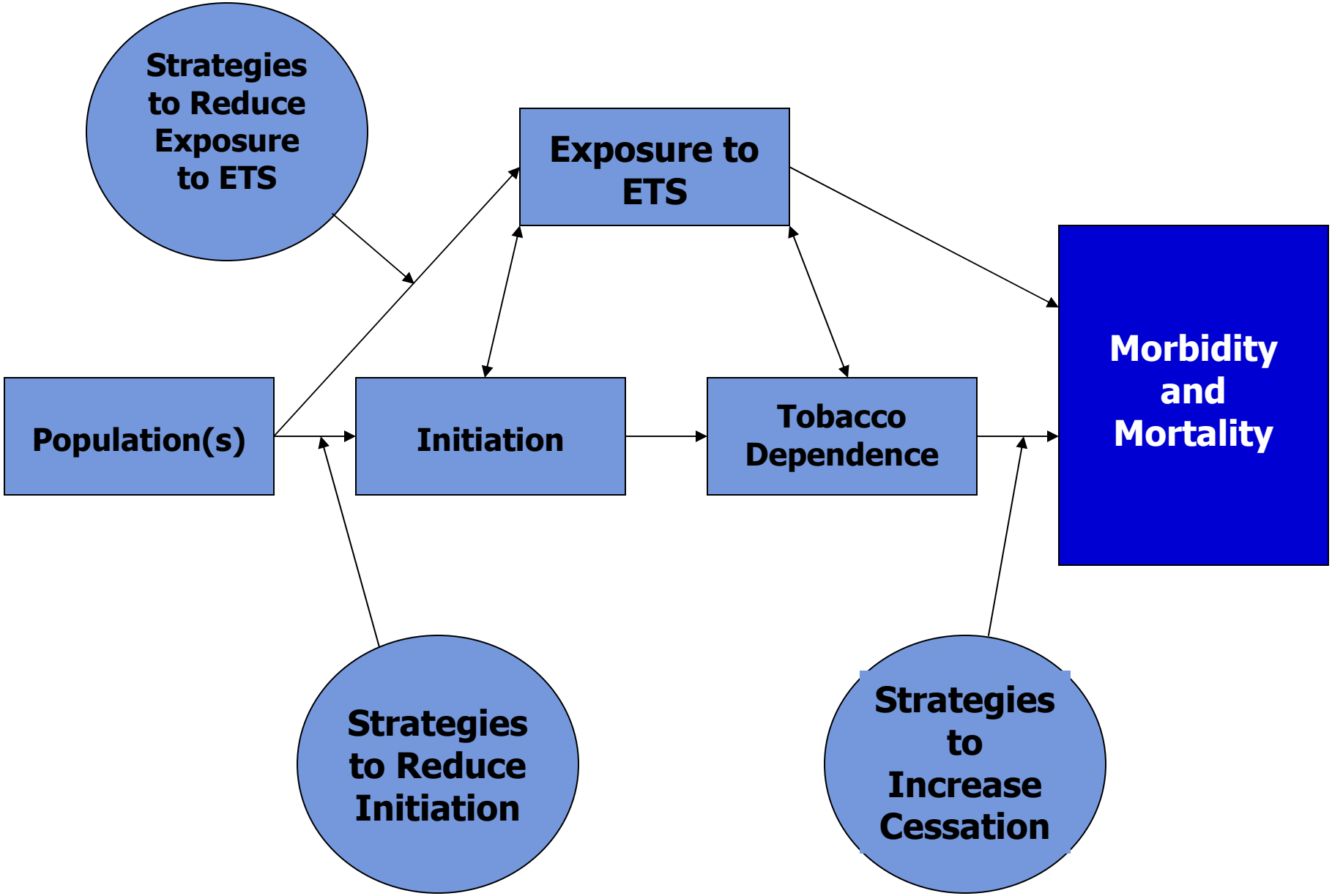
THE BEST WAY TO EXPLORE THE FUTURE IS TO **CHOOSE THE PATH TO BETTER HEALTH.**

NORTH CAROLINA'S COMPREHENSIVE PLAN TO PREVENT AND REDUCE THE HEALTH EFFECTS OF TOBACCO USE

Vision2010

Overview of Presentation

- North Carolina's evidence-based strategies to:
  - Prevent initiation of smoking and tobacco use
  - Reduce smoking or use of tobacco among current users
  - Eliminate exposure to secondhand smoke
  - Eliminate tobacco attributable health disparities
- Multi-faceted strategies involving many partners
  - Community and environment (earned and paid media, social and organizational norms)
  - Public policies
  - Clinical
  - Behavioral
- Vandana Shah will follow, providing the Health and Wellness Trust's efforts in tobacco prevention and cessation.


Strategies to Reduce Exposure to ETS
Exposure to ETS
Morbidity and Mortality
Population(s)
Initiation
Tobacco Dependence
Strategies to Reduce Initiation
Strategies to Increase Cessation

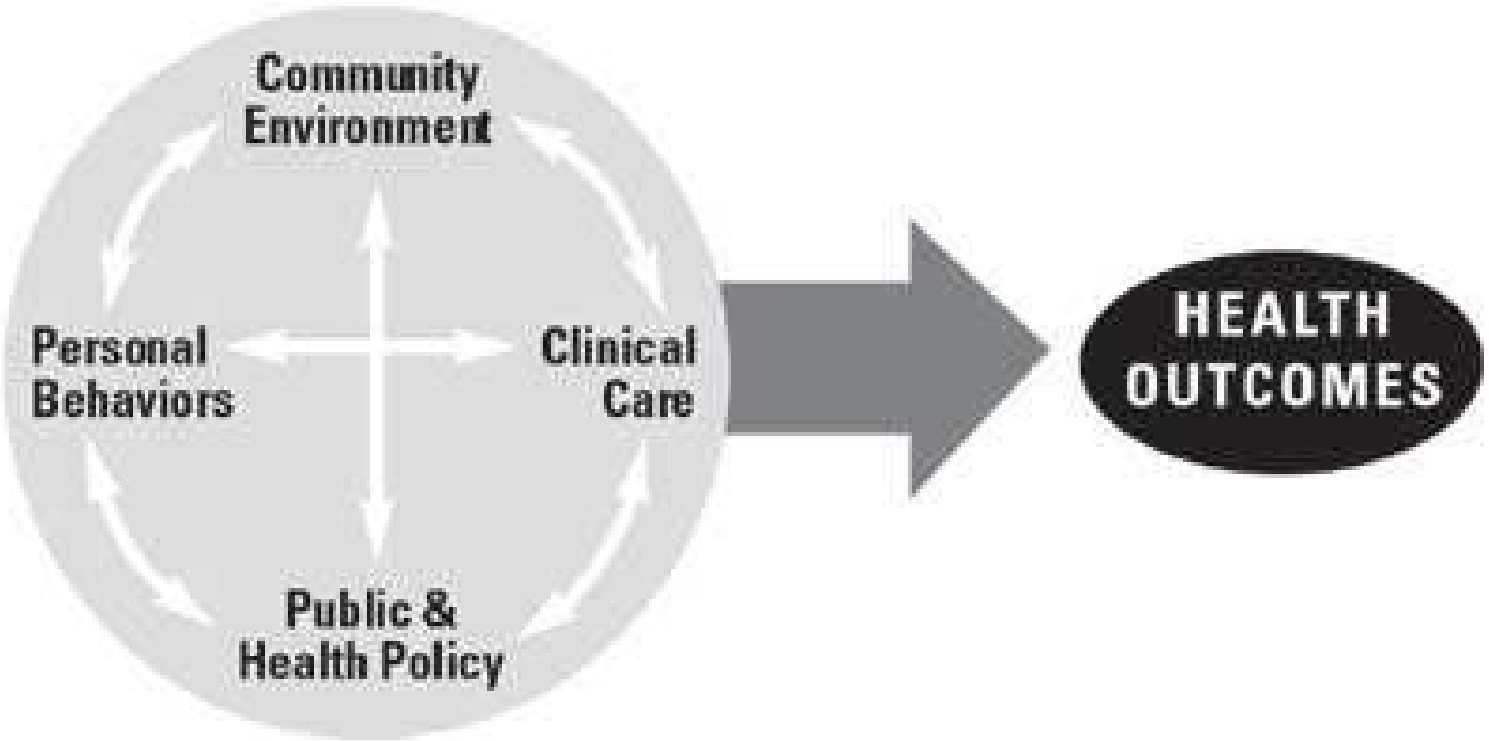
We Know What Works in Tobacco Prevention and Control

- Guide to Community Preventive Services (CDC) www.thecommunityguide.org
- Clinical Preventive Guidelines: Treating Tobacco Use and Dependence (AHRQ)
  http://www.ahrq.gov/path/tobacco.htm
- Best practices for comprehensive tobacco control programs (CDC)
  www.cdc.gov/tobacco

The Shoe Fits:

NC's Recent Track Record for evidence-based tobacco use prevention and control

Figure 1
Components of Health



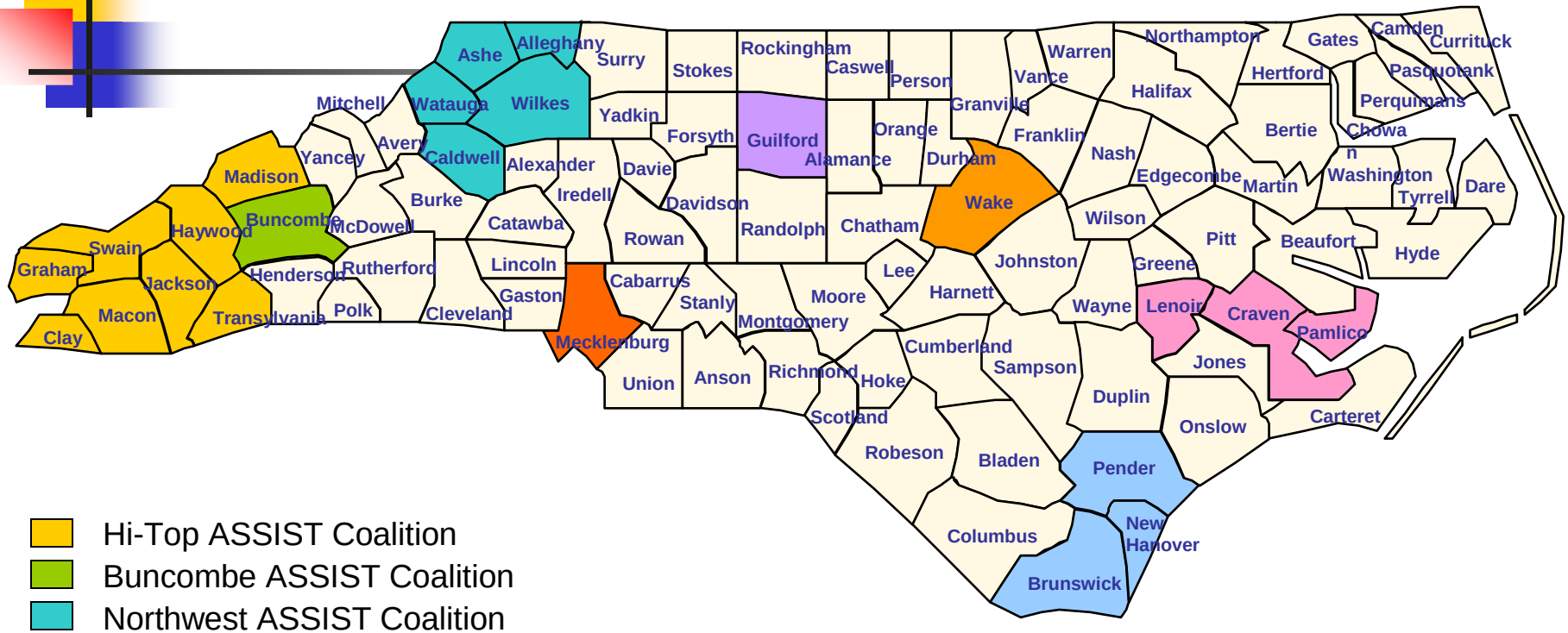
We Know What Works

Guide to Community Preventive Services
Recommended Interventions for Communities

Goal	Recommended Strategy
Reduce Initiation	Increase the price (tax) (PP) Mass media campaigns* (CE)
Increase Cessation	Increase the price (tax) (PP) Mass media campaigns* (CE) Telephone Quit lines* (CL/PB) Smoking bans (PP/CE)
Eliminate Secondhand Smoke Exposure	Comprehensive smoking bans in public places and workplaces (PP/CE)

*Effective when combined with other interventions

State and Local Public Health Infrastructure: Statewide Tobacco Prevention and Control



- Hi-Top ASSIST Coalition
- Buncombe ASSIST Coalition
- Northwest ASSIST Coalition
- Mecklenburg ASSIST Coalition
- Guilford County ASSIST Coalition
- Wake County ASSIST Coalition
- New Hanover/Brunswick/Pender Coalition
- Craven/Pamlico/Lenoir ASSIST Coalition

TPCB (CDC) funded Coalitions 2007

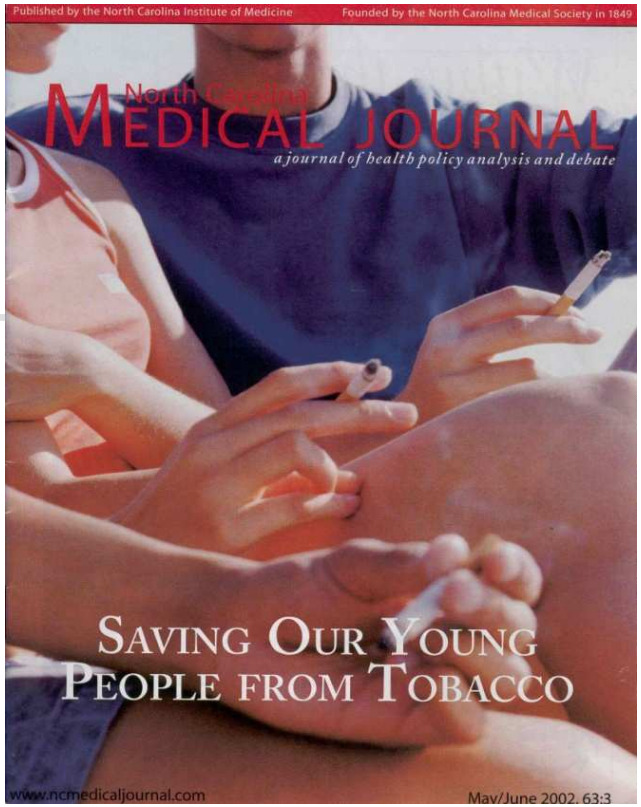
Public Policy Strategies

- Raising the cigarette tax
- Smoke-Free & Tobacco-Free Policies

Tobacco Taxes

Tobacco taxes are evidence-based:

- Prevent people from starting
- Reduce consumption
- Induce quitting
- Prevent relapse



Estimates indicate that a 10% rise in price reduces overall cigarette consumption by about 4%

Consumption decreases even more for adolescents than for adults

Small increases (less than 10 cents) are not effective

NC Tobacco Tax history

- Until 1969: Zero tax on cigarettes
- 1969: 2 cents
- 1991: 5 cents
- 2005: 30 cents
- 2006: 35 cents

National average = $1.11

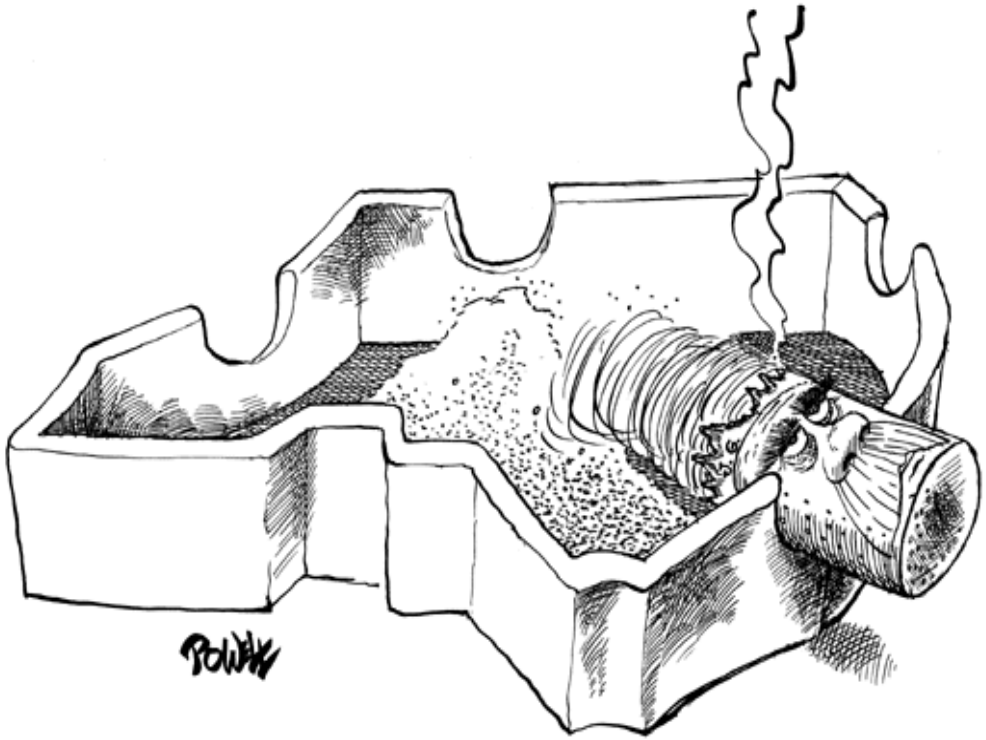
Cigarette Tax Increases: More Revenues, Less Smokers

North Carolina cigarette tax increase has led to reduced smoking

- Cigarette pack sales declined 18.7% between 2005 and 2006.
- Revenues increased 401.9% between 2005 and 2006: revenues rose from $39.15 million to $196.51 annually.

- Tobacco Tax revenues from 2005 increase went into the NC General Fund

Tobacco Free Policies for North Carolina

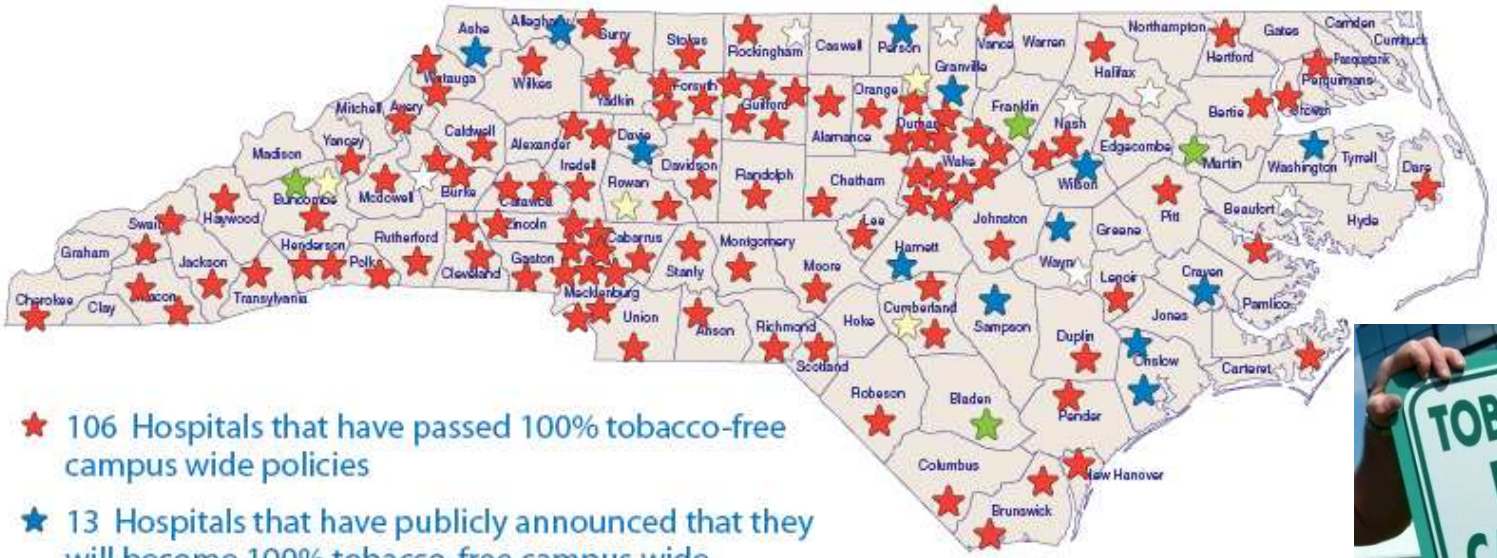


Where Everyone has the right to breath clean air.

NC Progress: Smoke-Free Community Environments

- 100% Tobacco-Free Schools
  - Youth advocates got support from Governor Hunt
  - School districts granted clear authority by NCGA
  - Started as local policy initiative in 2000-2001
  - Funding, staffing and leadership from HWTF was key to success!
  - Now required under state law (2007) that all school campuses are 100% smoke-free
- Healthy hospitals
  - Voluntary initiative adopted by almost all of the North Carolina hospitals
- Worksite wellness initiatives
- Support for smoke-free public policies in the news media

NC Success Story:
The Healthy Hospital Initiative



- 106 Hospitals that have passed 100% tobacco-free campus wide policies
- 13 Hospitals that have publicly announced that they will become 100% tobacco-free campus wide
- 4 Hospitals that have started the policy development process, but not yet announced when they will become 100% tobacco-free campus wide
- 7 Hospitals that NCPP and the NC Hospital Association have contacted to inform them of the policy initiative
- 4 Veterans Affairs Hospitals

Most NC hospitals offer cessation medications and counseling at no or low cost to employees

www.ncpreventionpartners.org

Many Employers Go Smoke-Free and Encourage Tobacco Cessation

- Employers are going smoke-free and offering tobacco cessation as part of worksite wellness initiatives
  - May offer incentives to encourage employees to quit
  - May offer nicotine replacement therapy and promote the NC Tobacco Use Quitline at 1-800-QUIT-NOW
- NC Prevention Partners offers prevention audit
  - Employers take online prevention audit, receive report card, strengthen tobacco prevention & cessation policies, benefits & incentives

Incremental Public Policy Wins in 2007

- **HB 24,** ***Prohibit Smoking in State Government Buildings*** and ***Permit Smoke-Free Local Government Buildings*** as of Jan 1, 2008
- **SB 1086,** ***Tobacco-Free Schools*** All LEA's must adopt and implement the policy by August 1, 2008
- **SB 862,** ***Smoke-Free UNC*** permissive legislation now in effect; implementation begins on 100' perimeter 1/1/08.
- **1294,** ***No Smoking/LTC Facilities*** Effective October 1, 2007; signage requirement by Jan. 1, 2008.
- **HB 1785 –*****Fire Safe Cigarettes*** by Jan. 1, 2010

Smoking Ban in Public Places and Places of Employment Failed

Bill introduced in North Carolina General Assembly to prohibit smoking in public places and places of employment (2007) (HB 259)

Sponsored by Rep. Hugh Holliman.

Revised to: AN ACT TO PROHIBIT SMOKING IN FOOD AND LODGING ESTABLISHMENTS AND STATE GOVERNMENT BUILDINGS AND ALLOW LOCAL GOVERNMENTS TO PROHIBIT SMOKING IN PUBLIC PLACES AND PLACES OF EMPLOYMENT.

Bill failed to pass the House by only 6 votes

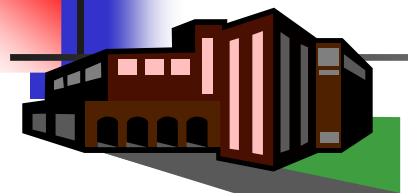
Restrictions in Smoking in Government Workplaces, Private Worksites and Public Places in North Carolina

- State Government Buildings:
  - State law prohibits smoking in state government buildings (eff. 1-1-2008).
  - Applies to all buildings owned by the state, leased by the state as landlord, or any area of the building leased and occupied by the state as lessee (tenant)
- Local Government Buildings: State law allows local government to prohibit smoking and use of tobacco in:
  - Buildings owned by local government, leased by local government as landlord or tenant
  - Any place on a public transportation vehicle owned or leased by local government and used by the public

Restrictions in Smoking in Government Workplaces, Private Worksites and Public Places in North Carolina (cont'd)

- State law allows local governments to prohibit smoking and all tobacco product use within:
  - Buildings that house local health and social services departments and grounds (up to 50 ft.) surrounding the buildings
  - Community colleges
  - Public Meetings
  - Libraries and Museums Open to the Public
  - Indoor Arenas with a Seating Capacity greater than 23,000

Restrictions in Smoking in Government Workplaces, Private Worksites and Public Places in North Carolina



UNC University System

State law authorizes the sixteen campuses of the UNC system to prohibit smoking on their grounds.

Grounds is defined to include the area located and controlled by state government within 100 linear feet of a building:

- Owned and occupied by the state,
- Owned by the state but leased to a third party, or
- Owned by a third party and leased to state government.

Private Colleges & Universities

No state laws.

Private Colleges and Universities may prohibit smoking and all tobacco product use in their buildings and on their grounds.

Public Schools K-12

State law requires local boards of education to adopt policies prohibiting the use of tobacco at all times:

- In school buildings,
- In school facilities,
- On school campuses,
- In or on any other property owned by the local school administrative unit, and
- At school-sponsored events at other locations when in the presence of students or school personnel.

Restrictions in Smoking in Government Workplaces, Private Worksites and Public Places in North Carolina

Long-term Care Facilities

State law prohibits smoking in all long-term care facilities; including nursing homes, adult care homes, and rest homes

- The law authorizes DHHS to impose fines upon facilities that fail to implement and enforce the prohibition.
- The law also requires home care agencies to prohibit their employees from smoking in a patient's home.

Hospitals

State law allows hospitals to prohibit smoking and all tobacco product use in their buildings and on their grounds.

Prisons

State law prohibits any person from using tobacco products inside of a state correctional facility.

- There may be an exception for authorized religious purposes.

Child Care Facilities

NC Child Care Commission prohibits family child care home operator(s) from using tobacco products at any time children are in care.

- Smoking or use of tobacco products is not allowed by anyone indoors when children are in care or in a vehicle when children are transported.

THE CHALLENGE: Many NC workplaces, particularly blue collar and service industry lack Restrictions on Smoking

Despite the sound science on the serious health hazards of secondhand smoke exposure,

NC has no current state or local regulations for smoking in the following:

- Restaurants/Bars
- Private Workplaces
- Retail Stores
- Recreational/Cultural Facilities

CDC strongly recommends ALL workplaces & public places be SMOKE-FREE

NC is taking an incremental approach:

- Slow steady progress without closing doors on future progress.
- In 2008 Justus Warren Heart Disease and Stroke Task Force taking action on NC Alliance for Health's incremental policy priorities:
  - *Smoke-free state gov't motor fleets, permission for local governments*
  - *Smoke-free perimeters of state controlled buildings, local authority for smoke-free grounds;*
  - *Tobacco-free community colleges*

Hand in Glove with Smoke-Free Policies: Helping Tobacco Users Quit

NC Tobacco Use Quitline

1-800-QUIT-NOW

1-800-784-8669

We Know What Works in Clinical Care Settings:

Goal	Recommended Interventions
Increase Cessation	Provider Reminder Systems* Telephone Quitlines* Reducing Out of Pocket Costs (NRT)
Reduce Initiation	
Reduce ETS	Smoking bans (in effect)

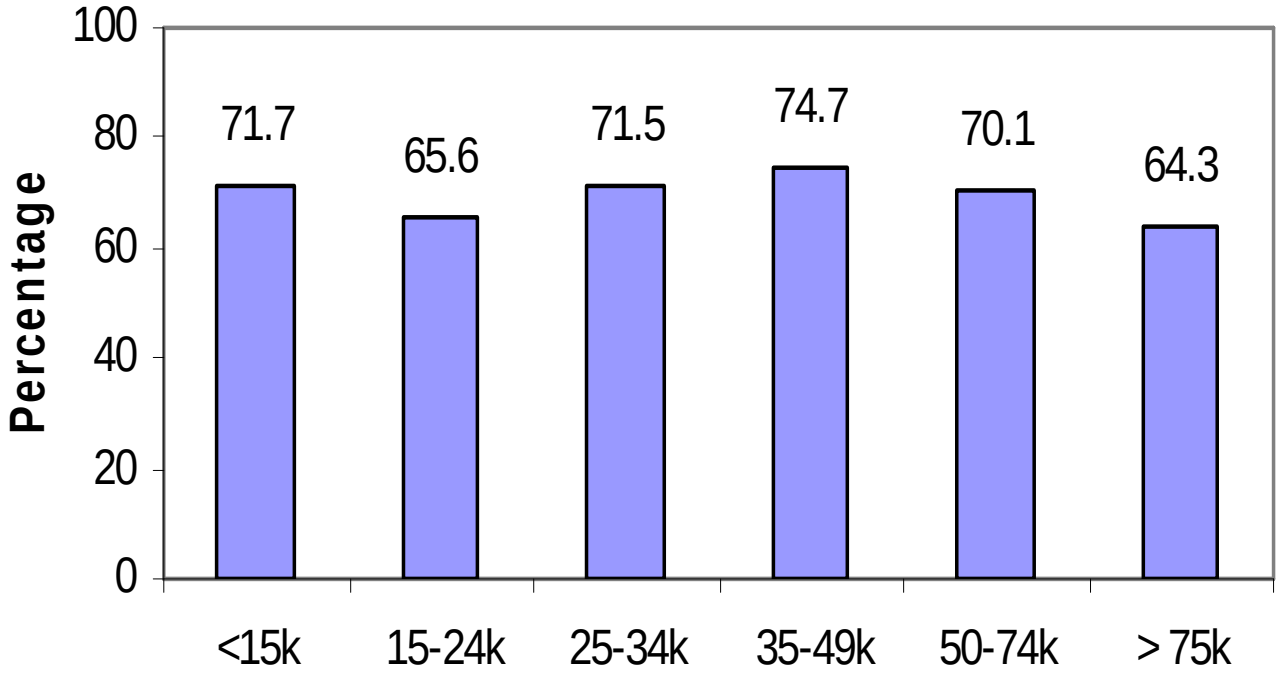
* When combined with other interventions

Clinical Care

- Helping Tobacco Users Quit
  - Provider Asks at every visit,
  - Provider Advises the patient to quit,
  - Provider Refers patient to the NC Tobacco Use Quitline (1-800-QUIT NOW) for expert, in-depth quit coaching services
  - Provider assesses need for Pharmacotherapy – Nicotine replacement or other evidence based cessation medications
- Insurance Coverage of Tobacco Cessation

NC Provider Behavior

Percentage of N.C. adults who report health professional advised them to quit smoking, by income: N.C. BRFSS, 2006



Provider Behavior

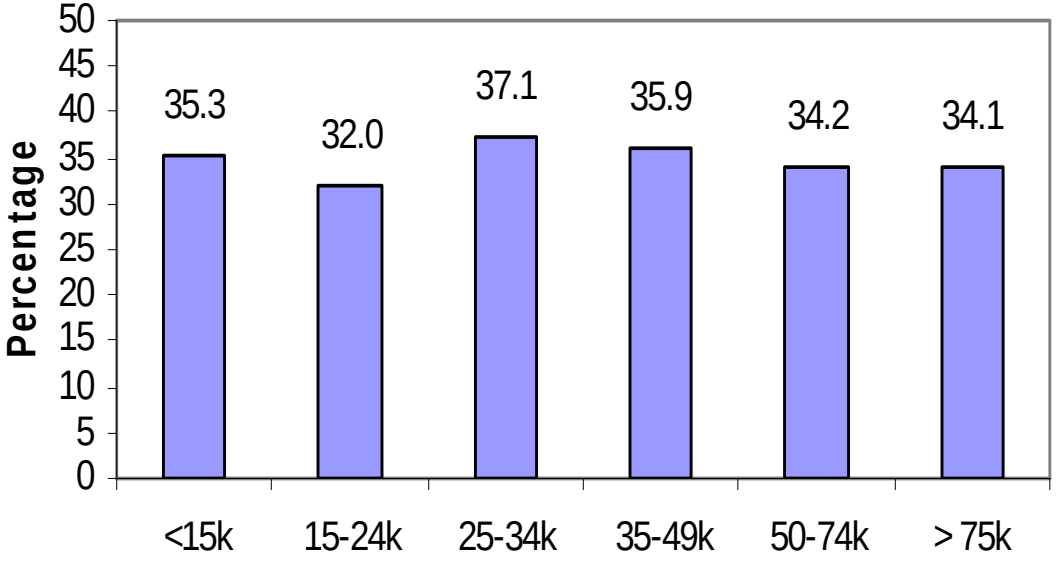
Here we have room for improvement.

Smokers Using:

•NC Tobacco Use Quitline
•Nicotine Replacement Therapy (NRT)

DOUBLES the chances of quitting successfully

Percentage of N.C. current smoking adults who discussed medical cessation treatment with health professional, by income: N.C. BRFSS, 2006



Establishing Tobacco Cessation Systems "every patient, every time"

Prevention Partners is working with hospitals, private and public clinic systems, and private providers to encourage providers to offer: brief screening, counseling, pharmaceutical support, referral & follow-up

- Starting the Conversation Tools
- Educate Providers and Payers
- Refer to The NC Tobacco Use Quitline –
  - **1-800- QUIT NOW (1-800-784-8669)**
- Refer to NC Good Health Directory for local programs

  www.ncgoodhealthdirectory.com

www.ncpreventionpartners.org

Tobacco Cessation Reimbursement by NC Health Plans

Preventive Benefits Profile details preventive benefits offered by NC public and private health plans:

www.ncpreventionpartners.org/preventivebenefits

Coverage of Evidence-Based Cessation by NC Health Plans, 2005-2007

	Aetna	BCBS NC	Cigna	First Carolina Care	Medicaid	Medicare	State Health Plan	United	Wellpath
Screening / Assessment		X					X	X	
Cessation Expert quit coaching by the Quitline, program, or Primary Care Provider		X	X		(FFP for NC Quitline)	X	X	X	X
Tobacco Cessation medications, Prescription		X	X	X	X		X		
Tobacco Cessation medications, Over-the-counter		X	X	X	X		X		X
Last Update Received from Insurer	**Jun-05**	Feb-08	Feb-07	Apr-08	Apr-08	Aug-07	Apr-08	Jul-07	Jan-06

www.ncpreventionpartners.org

Increasing Insurance Coverage of Cessation Counseling & Drugs

- Prevention Partners working with private and public insurers to encourage more coverage of cessation counseling and medications
  - Conducted pilot for cessation benefits for SHP who subsequently rolled out evidence-based benefit
  - Convene Health Plan Prevention Roundtable – this year focused on plan utilization of the NC Quitline & new AMA CPT codes
    - Medicare added new CPT codes for tobacco cessation counseling.

NC Medicaid Current Coverage

- Medicaid now covers:
  - ALL cessation pharmacotherapy
    - Nicotine patch, gum, lozenge, nasal spray, inhaler
    - Zyban
    - Chantix
  - No Prior Authorization needed

NC Tobacco Prevention and Control Branch

North Carolina Tobacco Use Quitline

- 1-800-QUIT-NOW (1-800-784-8669)
- 8a.m. - midnight, 7 days a week; Toll-free; Confidential
- All North Carolinians - youth and adult
- Proactive – Quit coaches can call tobacco users back upon request, or make 1st call
- Fax referral available
- Available in multiple languages

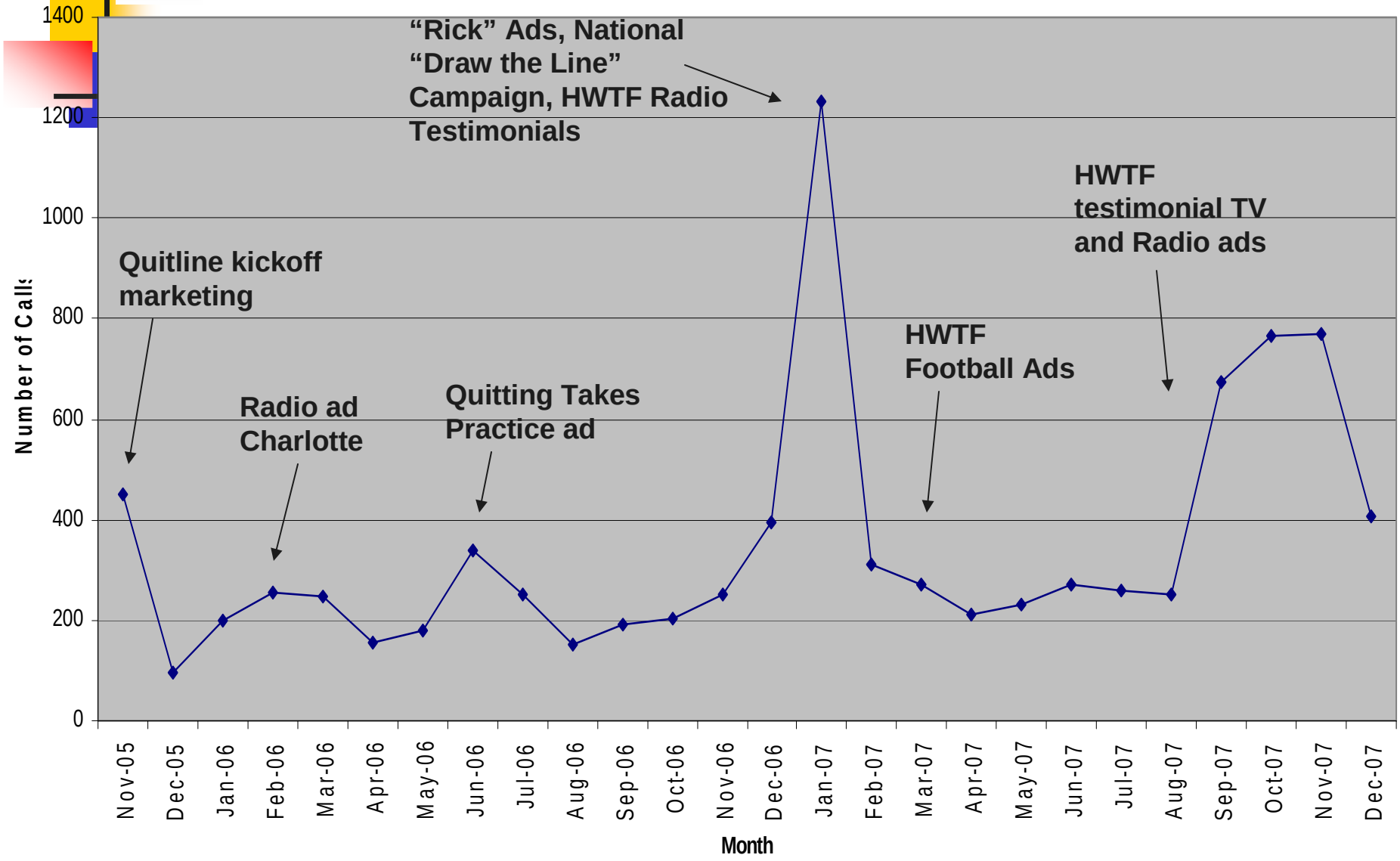
Administered by the Tobacco Prevention and Control Branch, NC Division of Public Health

Funded by the NC Division of Public Health, NC Health and Wellness Trust Fund

NC Tobacco Use Quitline

- Science-based
- Cost effective
- Used by NC health care providers
- Liked by callers
- Data-generating
- As effective as other cessation programs *and* much more accessible!
- 57% of NC adult smokers working on quitting (2006 BRFSS) yet NC funding allows reach of less than 1% of smokers.
- CDC recommends states provide funding to reach 4-6% of smokers

NC Quitline Calls Total
November 2005 to December 2007



Become an EX

Relearn life without tobacco at

www.becomeanEX.org

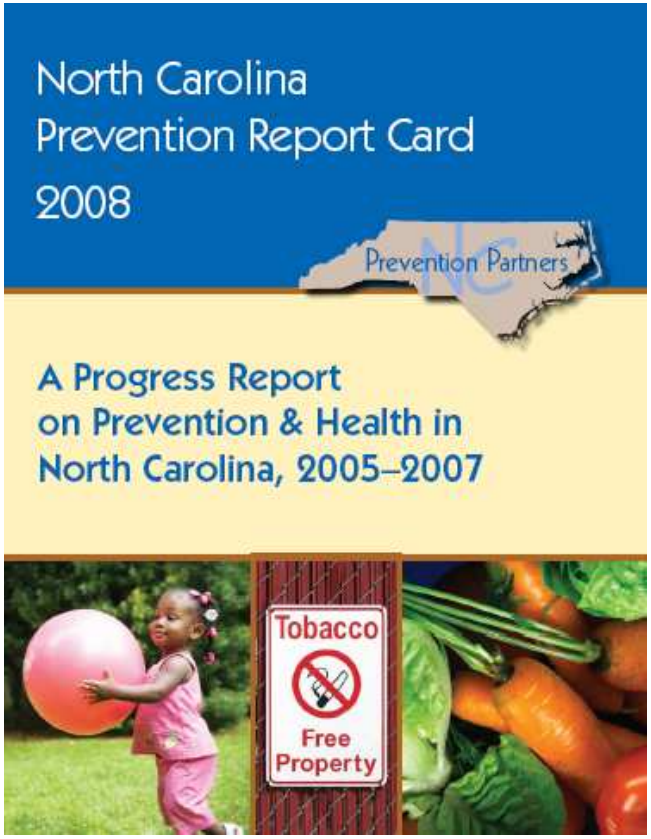
NATC

National Alliance for Tobacco Cessation

"Relearn": Life Without Tobacco

Measure and Report NC Progress Against National 2010 Tobacco Goals

2008	**C**
2005	**C**
2002	**D**
2000	**D**



www.ncpreventionpartners.org

NC State of Tobacco Control 2007
How can we improve our grades?

REPORT CARD

STATE OF TOBACCO CONTROL 2007
NORTH CAROLINA

GRADES:

Tobacco Prevention & Control Spending	F
Smokefree Air	F
Cigarette Tax	F
Youth Access	C

AMERICAN LUNG ASSOCIATION®

Further Work Needed

- With limited resources, the experts clearly say, focus on policy.
- With resources for comprehensive programs, and strong multifaceted partnerships, tobacco control can lead the way for other chronic disease prevention solutions.
- *Lets work together to make NC the healthiest state in the nation!*