

# HEALTH FIRST COLORADO – Colorado’s Medicaid Program

# TOBACCO CESSATION BENEFIT

## WHAT PROVIDERS NEED TO KNOW

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Tobacco use can lead to nicotine addiction, a physiologic dependence and behavioral compulsion to continue using tobacco despite knowing its harmful effects. Nicotine addiction is a chronic relapsing condition which warrants medical attention and often repeated treatments.<sup>1</sup>

### BENEFIT OVERVIEW

The Colorado Medicaid Tobacco Cessation Benefit provides members with access to free, proven tobacco treatment. The comprehensive benefit includes: medications, counseling, Colorado QuitLine services, and enhanced services for pregnant women.



**The Pharmaceutical Benefit covers treatment of the physiological effects of nicotine dependence.**

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### MEDICATIONS

Health First Colorado enrolled providers can prescribe any of the seven FDA-approved nicotine replacement therapy (NRT) and non-nicotine containing medications, all of which are on the Medicaid formulary and available to any Health First Colorado member at local pharmacies:

- Nicotine patch, nicotine gum, nicotine lozenge, Nicotrol® NS (nicotine nasal spray), and Nicotrol® Inhaler (nicotine inhalation system).
- ZYBAN® (bupropion hydrochloride SR) and Chantix® (varenicline).

### TREATMENT PLAN

Research has shown that cessation rates are higher with the use of combination therapy versus monotherapy.<sup>2</sup> Only one tobacco cessation product can be prescribed at any given time, unless:

- the nicotine patch is used in combination with the nicotine gum or lozenge, or
- ZYBAN® (bupropion hydrochloride SR) is used in combination with the NRT patch, gum, lozenge, Nicotrol® NS (nicotine nasal spray), or Nicotrol® Inhaler (nicotine inhalation system)

### PRESCRIPTION

Talk to your patient and decide the best medication treatment option.

- Consider combination therapy.
- Write a prescription, which is required for all covered tobacco cessation medications including over-the-counter (OTC) NRT products.

### COUNSELING

Members should participate in tobacco cessation counseling either in person through an approved Health First Colorado provider (certified nurse-midwives, osteopaths, physicians, physician assistants, nurse practitioners, and registered nurses) or over the phone through the Colorado QuitLine. For members who are immobile, counseling may be offered over the phone by an approved provider.

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<sup>1</sup> The Past, Present, and Future of Nicotine Addiction Therapy, Judith J. Prochaska and Neal L. Benowitz. Annu. Rev. Med. 2016. 67:4.1-4.20, Accessed August 2015

<sup>2</sup> Kozłowski et al, 2007; Bohadana, Nilsson, Rasmussen & Martinet, 2000; Piper et al, 2009



## The Behavioral Counseling Benefit addresses tobacco use behaviors.

### COUNSELING MAKES A DIFFERENCE

Behavioral counseling offers coping strategies for handling short-term nicotine cravings and living a long-term tobacco-free lifestyle. Provide behavioral counseling or refer your patient to the free coaching services offered by the Colorado QuitLine. Patients may receive benefits from both Health First Colorado and the QuitLine simultaneously if desired.

### PROVIDER COUNSELING

Health First Colorado covers tobacco cessation and relapse prevention counseling services free to members. Services may be offered to clients who use tobacco and to those at-risk of using tobacco, including teens, young adults, and all former tobacco users. Qualified providers who deliver tobacco cessation counseling to their patients can be reimbursed through Health First Colorado for both individual and group sessions at the following levels of service:

- **Intermediate:** Up to 5 counseling sessions (units) ranging between 4-10 minutes can be reimbursed per member per state fiscal year.
- **Intensive:** Up to 3 counseling sessions (units) greater than 10 minutes can be reimbursed per member per state fiscal year.
- Counseling may also be offered by other healthcare professionals under the supervision of approved Health First Colorado providers.

### TIPS FOR PROVIDERS

Remember: when your patient decides to quit, you can influence the outcome. Strongly recommend appropriate tobacco cessation medication; give clear instructions on correct use; stress the importance of adherence.

### 3 STEPS, IN 3 MINUTES, AT EVERY VISIT

In fewer than 3 minutes you can identify and direct your tobacco using Health First Colorado patients toward proven-effective treatment. Here's what to do and say:

1. Ask all patients about tobacco and nicotine use

at every visit. “Do you use any form of tobacco or nicotine like cigarettes, cigars, hookahs, or dip? Do you use any type of electronic smoking device like an e-cigarette or vape pen?”

2. Advise tobacco users to quit with a clear message, personalized to their health. “Quitting tobacco is the best thing you can do for your health now and in the future, and here’s why...”
3. Prescribe medication and refer for proven tobacco cessation treatment. “I can prescribe stop smoking medicine to decrease your cravings.” And/or: “I can provide quit coaching or refer you for help to learn to live your everyday life without tobacco.”

### ADDRESS RELAPSE

Nicotine addiction is a chronic relapsing condition which warrants medical attention and often repeated treatments. However, with the right treatment, patients can quit for good. Patients typically make multiple attempts before succeeding at a long-term quit. Providers can offer non-judgmental and consistent encouragement by

- a) regularly inquiring about tobacco use, quit attempts, and quit status at each patient visit and b) re-offering or referring to treatment if relapse occurs.

### PROVIDER TRAINING

Healthcare providers are encouraged to seek continuing education on tobacco cessation.

- A free one-hour webinar, Tobacco Cessation Guidelines for HealthCare Providers, addresses medication protocols, clinical guidelines, motivational interviewing, emerging tobacco products, and resources. [bit.ly/provider-tobacco-cessation-guidelines-webinar](https://bit.ly/provider-tobacco-cessation-guidelines-webinar)
- Treating Tobacco Use and Dependence: 2008 Update. This is the national clinical practice guideline on tobacco treatment. [bit.ly/treating-tobacco-use-dependence-update-2008](https://bit.ly/treating-tobacco-use-dependence-update-2008)

## E-CIGARETTE PRODUCTS

E-cigarette products have the potential to benefit adult smokers who are not pregnant if used as a complete substitute for regular cigarettes and other smoked tobacco products. E-cigarettes have not been approved by the FDA as a tobacco cessation aid. In addition, products using nicotine aerosol can contain substances that harm the body and their long term health effects are unknown. The Health First Colorado benefit does not cover e-cigarettes for cessation treatment.

## GUIDANCE FOR YOUTH WHO VAPE

One in four Colorado youth report using nicotine-containing vapor products (Juuls, e-cigarettes); Colorado is No. 1 in the country for youth vaping.

Teens who vape are at higher risk for nicotine addiction, the adverse effects of nicotine on developing brains, and cigarette use.

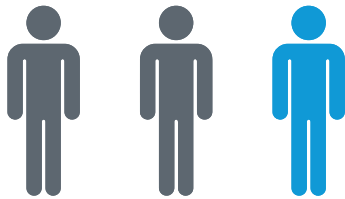
Colorado data show youth who vape also are more likely to engage in other high-risk behaviors, including substance use and risky sexual behaviors.

In addition to screening for tobacco use, ask patients specifically about vaping, counsel on vaping and nicotine, and consider screening teens who vape for associated high-risk behaviors (substance use and risky sexual behaviors).

For more information on youth vaping, read the Colorado Department of Public Health and Environment's [guidance for healthcare providers](#).

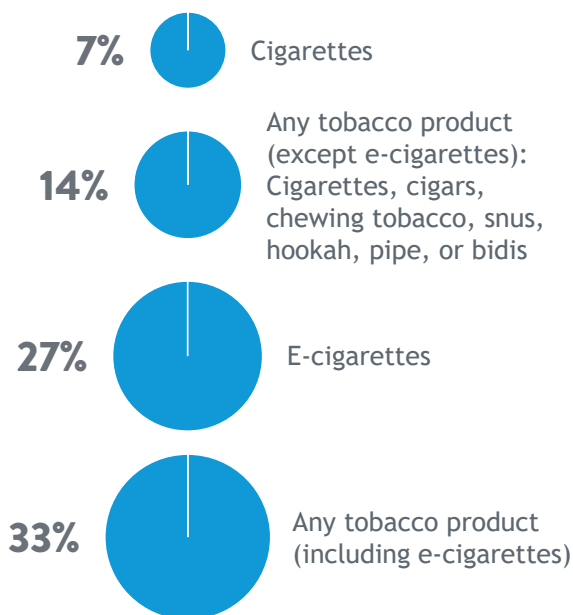
## CURRENT USE OF TOBACCO PRODUCTS

**33%**  
of Colorado youth are using nicotine.\*

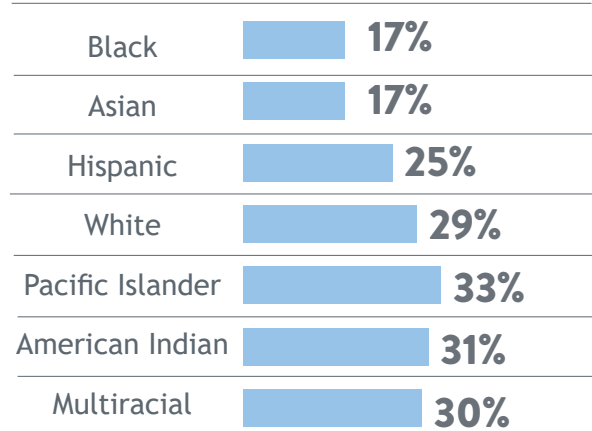


*\*All tobacco products including cigarettes, chew, e-cigarettes, hookah, cigars and others*

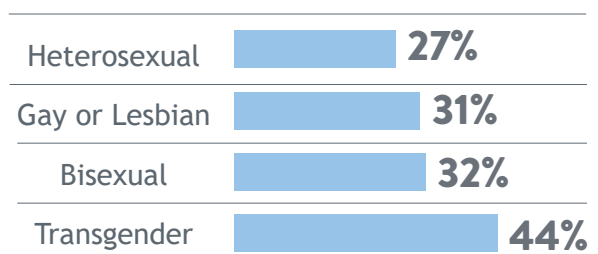
## TOBACCO USE BY PRODUCT TYPE



## CURRENT E-CIGARETTE USE BY RACE / ETHNICITY



## CURRENT E-CIGARETTE USE BY SEXUAL ORIENTATION AND GENDER IDENTITY



## MEMBER CESSATION SERVICES ARE FREE

There are no co-pays for tobacco treatment services, including counseling and FDA approved cessation medications, through Health First Colorado. ZYBAN® (bupropion hydrochloride SR) are also co-pay exempt when a diagnosis code for smoking cessation (ICD10 Disease Group=F17 ; ICD10 Code Z87.891, Z72.0) is listed on the claim form.



## PREGNANT WOMEN

Because smoking is one of several risk factors for having a low birthweight baby, pregnant women on Health First Colorado may qualify for the free **Prenatal Plus Program** that includes a case manager, dietitian, and mental health provider who work together to support a healthy pregnancy.

Your patient can call the Health First Colorado Customer Contact Center 1-800-221-3943 (or State Relay: 711) to be screened for eligibility.

For more information visit [www.colorado.gov/pacific/hcpf/prenatal-plus](http://www.colorado.gov/pacific/hcpf/prenatal-plus)



## The Behavioral Counseling Benefit also covers Colorado QuitLine Services

### REFER PATIENTS TO THE QUITLINE

The QuitLine offers free telephone-based tobacco treatment (coaching), online, email, and text support to patients 12 years and older. Cessation medications are available to those over the age of 18 who are enrolled in either the telephone coaching or web-based program.

Providers can refer patients by faxing the Fax to Quit Form to 1-800-261-6259 or completing the online version ([bit.ly/QuitLineReferral](http://bit.ly/QuitLineReferral)). Prior authorization is not required for QuitLine services and PAR forms should not be sent to the QuitLine.

Also encourage patients to call the QuitLine: 1-800-QUITNOW.

The QuitLine will reach out to your patient:

- A quit coach makes three attempts to contact your patient by phone to offer services. The first attempt to contact the client is typically completed within 48 hours of receipt of provider fax or online referral, or patient online enrollment.
- Once your patient is reached, the coach conducts a brief screening and offers five proactive coaching sessions.

- QuitLine participants over the age of 18 are eligible for FREE cessation medications: 8 weeks of patches, gum, and lozenges for up to 2 quit attempts per year and up to 12 weeks of Chantix® (varenicline), while supplies last, once per year for patients with valid provider prescription. QuitLine benefits are subject to change and combination therapy is also available.

\*\*The QuitLine will work with pregnant women or patients with uncontrolled high blood pressure, heart disease, or a recent heart attack to secure a provider release to offer NRT.

HIPAA covered entities referring patients by Fax to Quit or web referral receive QuitLine patient status reports back by fax.



The QuitLine provides special services to help **pregnant women** quit smoking during pregnancy and stay smoke-free after the baby is born. Program includes up to 9 total calls; pre- and post-partum and up to 16 total weeks of NRT offered pre- and post-partum with provider approval. Specially trained, dedicated coaches, texting and gift card incentives are also available.

# Codes for Tobacco Use Documentation and Billing for Treatment

## ICD-10 codes for nicotine dependence

- F17.2 Nicotine dependence, unspecified
- F17.21 Nicotine dependence, cigarettes
- F17.22 Nicotine dependence, chewing tobacco
- F17.29 Nicotine dependence, other tobacco product

Each of these codes has an additional digit to reflect “in remission” and other dependence statuses

## For women who are pregnant or have newborns

- 099.33 (smoking complicating pregnancy, childbirth, and the puerperium)
- P04.2 (newborn affected by maternal use of tobacco)
- P96.81 (exposure to environmental tobacco smoke in the perinatal period)
- T65.2 (toxic effect of tobacco and nicotine)
- Z57.31 (occupational exposure to environmental tobacco smoke)
- Z71.6 (tobacco use counseling not elsewhere classified)
- Z72 (tobacco use not otherwise specified (NOS))
- Z77.2 (contact with and exposure to environmental tobacco smoke)
- Z87.8 (history of nicotine dependence)

## CPT codes for billing tobacco cessation counseling services

Qualified providers (physicians, certified nurse-midwives, osteopaths, physician assistants, nurse practitioners, and registered nurses) can be reimbursed through Medicaid for both individual and group tobacco cessation counseling. Tobacco cessation counseling may be offered and billed on the same day as the initial doctor office visit.

- 99406 (individual) - Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes
- 99407 (individual) - Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes

## Modifiers to CPT Codes

- Modifier HQ added to intermediate or intensive CPT codes indicates group counseling visit (e.g., 99407+HQ).
- Modifier HD added to intermediate or intensive CPT codes indicates pregnant/parenting women’s program, and is required for all claims made for pregnant women (e.g., 99406+HD).

## Medicare Coverage

- Medicare Part B (Medical Insurance) covers up to 8 face-to-face counseling sessions in a 12-month period. Counseling must be delivered by a qualified Medicare provider.
- Medicare Part D covers prescription medications.
- Health First Colorado is the payer of last resort for patients that are also Medicare eligible.

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For more information about the Colorado Medicaid Tobacco Cessation Benefit:

- Visit [colorado.gov/cdphe/providers](http://colorado.gov/cdphe/providers) and [colorado.gov/pacific/hcpf/tobacco-cessation](http://colorado.gov/pacific/hcpf/tobacco-cessation)
- Order materials on-line at [cohealthresources.org](http://cohealthresources.org)