

Informational testimony on HB 289

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The intentions of House Bill 289 to increase access to tobacco use cessation services for Montanans is admirable. Preventing Montana youth from initiating tobacco use and helping Montanans quit smoking is critical to improve the health of our state. Many of the services described in HB 289, however, would duplicate existing cessation services provided by the Department of Public Health and Human Services Tobacco Quit Line and the Medicaid program. Tobacco use Quit Lines are a key component of a comprehensive approach to tobacco prevention. Briefly, I would like to provide you with information regarding the existing cessation services that are available to Montanans through the Montana's Tobacco Quit Line.

The Montana Tobacco Quit Line provides free tobacco cessation counseling services for all Montanans including self-help educational materials and encouragement to call back, brief motivational counseling, and proactive behavioral counseling sessions for Montanans that enroll in the program. Additionally, free nicotine replacement therapy (NRT) is provided to qualified individuals who enroll. This includes Montanans that do not have health insurance or whose insurance does not cover NRT. Medicaid also provides coverage for NRT and pharmacotherapy for recipients that are seeking to quit.

The Quit Line is funded through proceeds from Montana's portion of the Master Settlement Agreement and through a supplemental funding from the Centers for Disease Control and Prevention. It is administered through the Department's Tobacco Use Prevention Section through competitively procured contracts with National Jewish Medical and Research Center in Denver and Wendt Advertising in Billings. In this current year we will spend approximately \$850,000 dollars to implement this service. Approximately \$350,000 is being spent to market the Quit Line, which includes television, radio, and newsprint advertisements, and billboards. We

also have been disseminating information on the service to health care professionals throughout Montana. Additionally – our community programs are disseminating information about this service in their local communities.

Quit Lines have been shown to be a cost-effective population-based strategy to help people quit using tobacco. In California, randomized trials showed a doubling of cessation rates due to the use of telephone counseling compared with the use of self-help materials alone.^{1,2}

Quit Lines also reduce many of the barriers people face when trying to quit by providing extended hours of service availability, the services are anonymous, and transportation as well as child care aren't an issue.

Are Montanans using the Quit Line? Yes. From May through December 2004 over 3,000 Montanans called the Quit Line (Figure 1), over 2,200 enrolled in phone counseling, and over 1,600 have utilized the NRT benefit. Ninety-four percent of callers currently use tobacco. Of these callers, 40% have no health insurance and 15% are Medicaid recipients. The majority of callers found out about the Quit Line through advertisements (41%, Figure 2).

In 2005 utilization of the Quit Line has been tremendous. For the first 19 days of January over 2,000 Montanans have called the Quit Line and 800 have enrolled in the program.

Population-based Quit Lines are one of the key components of a comprehensive approach to tobacco prevention. If Governor Schweitzer's budget and prevention plan are approved the Department plans to increase access to the Montana Quit Line to help as many Montanans as possible quit.

References:

- 1) Zhu S-H, Stretch V, Balabanis M, et al. Telephone counseling for smoking cessation: effects of single-session and multiple-session interventions. *Journal of Consulting and Clinical Psychology*. 1996; 64 (1): 202-211.
- 2) Zhu S-H, Anderson CM, Tedeschi GJ, et al. Evidence of real-world effectiveness of a telephone Quitline for smokers. *New England Journal of Medicine* 2002; 347 (14), 1087-1093.

Figure 1. Number of intake calls, phone counseling enrollment calls, and requests for Nicotine Replacement Therapy (NRT) to the Montana Tobacco Quit Line, May to December 2004.

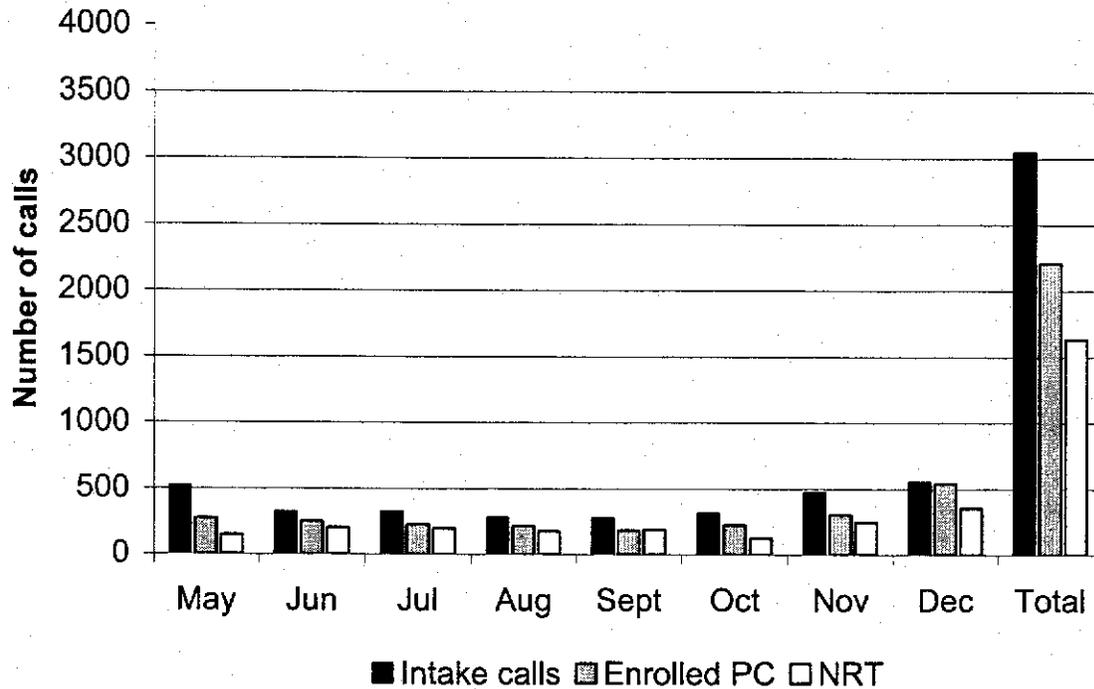


Figure 2. Referral sources to the Montana Quit Line, May through December, 2004.

