

Quality Matters

January 2018

Topic: Tobacco Use Kentucky Ranks 49th for Smoking in 2017 America's Health Ranking

National smoking rates have seen noted decline since the 1990s, decreasing 41%. Kentucky now ranks 49th among other states with 24.5% of reported adults who smoke. Cigarette smoking is the leading cause of preventable disease and death in the US, accounting for 1 of every 5 deaths.

Kentucky ranks 50th in cancer deaths, 43rd in cardiovascular deaths, and 50th in preventable hospitalizations. If no one smoked, 1 in 3 cancer deaths would not occur. More than 16 million Americans live with smoking-related diseases. Smoking costs the US billions of dollars each year.

www.AmericasHealthRankings.org

www.cancer.org

Did you know:

Smoking impacts nearly every organ in the body. Smoking is a cause of Type 2 Diabetes Mellitus and can make it harder to control. The risk of developing diabetes is 30-40% higher for active smokers than nonsmokers. Smoking also causes rheumatoid arthritis. It negatively impacts fertility in both men and women, and can have negative impact on pregnancy. Smoking causes stroke, coronary artery disease, 90% of lung cancers, cancers of the cervix, bladder, colon and rectum, pancreas esophagus, and other organs. Life expectancy for smokers is at least 10 years shorter than for nonsmokers.

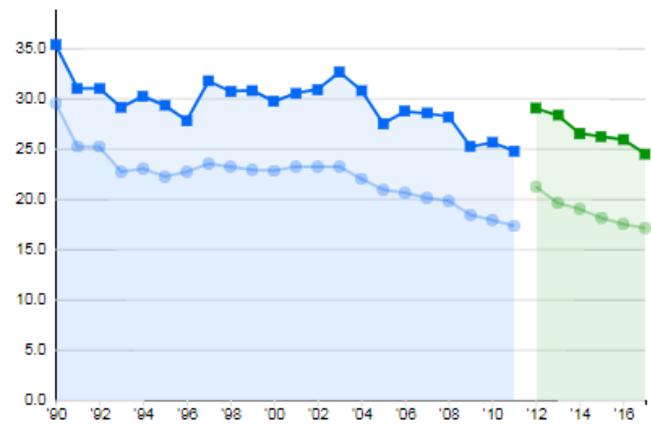
www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/tobacco_related_mortality/



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Trend: Smoking, KY, US, 2017 Annual Report
America's Health Rankings
Percentage of Adults: 24.5%; Rank: 49



Can we have an impact on smoking in Kentucky? Yes, we can!

1. Quitting smoking before the age of 40 reduces the risk of dying from smoking-related disease by about 90 percent.
2. Most people who smoke say they would like to quit.
3. Quitting smoking cuts cardiovascular risks. Just 1 year after quitting smoking, your risk for a heart attack drops sharply.
4. Within 2 to 5 years after quitting smoking, your risk for stroke could fall to about the same as a nonsmoker's.
5. If you quit smoking, your risks for cancers of the mouth, throat, esophagus, and bladder drop by half within 5 years.
6. Ten years after you quit smoking, your risk for lung cancer drops by half.

How?

1. Providers should inquire about tobacco use and provide resources for tobacco cessation.
2. Have educational materials available all of the time.
 - a. Cessation materials and courses
 - b. Pamphlets, posters citing the benefits of quitting, as well as reasons to quit.
3. Be supportive.

This segment was brought to you by KentuckyOne Health Partners and KentuckyOne Health Medical Group in partnership for quality.

For more information, please contact:
KentuckyOne Health Partners
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Quality Metrics:

- Smoker? Yes or No
- Or Tobacco User? Yes or No
- Non-tobacco user? Yes or No
- If tobacco is used, was cessation counseling offered and documented? Yes or No

Reporting on Tobacco Use Measures

One of the biggest challenges for the CIN is being able to easily access the cessation data for reporting to the various insurance carriers. Smoking information is now documented in a discrete place in electronic records so it is easy to find, but cessation information is not. We still have to hunt for the information manually.

In the health record, electronic or paper:

- | | |
|--|--------|
| 1. Smoker? | Yes/No |
| 2. Other tobacco user? | Yes/No |
| 3. Cessation help offered and discussed? | Yes/No |

Impact on CIN Network Providers

KentuckyOne Health Partners payers offer quality incentives for managing their patients' health according to national standards set by CMS, CDC and Healthcare Effectiveness Data and Information Set (HEDIS) which is a tool used by more than 90 percent of America's health plans to measure performance on important dimensions of care and service. Please see the websites listed below for more information about actual HEDIS measures and ACO/MSSP measures or call Kitty Grider, RN, KentuckyOne Health Partners System Quality Manager at 502.489.3042.

<http://www.ncqa.org/HEDISQualityMeasurement>
<http://www.CMS.gov>

All KentuckyOne Health Partners major contracts include smoking and smoking cessation as a health issue that must meet benchmarks in improvement in all elements of the measure in order to earn quality incentives.



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Quality Improvement Project

How can you help your provider take care of the patients who use tobacco and want to quit?

1. Get educational material and make it available in every area in your office. If you don't have materials, ask your office manager to order some for you. Some websites for resources are:

<http://www.cdc.gov/tobacco>
<http://www.kycancerprogram.org/portal>
<http://betobaccofree.hhs.gov/quit-now/>

2. Take the time to talk with a patient if they ask you about smoking cessation.
3. Be able to discuss the benefits of quitting:
 - A. See "Did You Know" section
 - B. Increased lung capacity, shortness of breath decreases
 - C. Decreased risks of CAD, heart attack, stroke and cancers
 - D. Reduce risks for diabetes and other conditions such as rheumatoid arthritis
 - E. Healthier Skin
 - F. Increased circulation
 - G. Ability to smell and taste is enhanced
 - H. Save money

Between 2 weeks & 3 months after quitting:

- A. Heart attack risk begins to drop and circulation improves
 - B. Lung function increases
 - C. Physical withdrawal is subsiding (It is important to know and prepare for ways to reprogram urges). This type of skill is taught in cessation classes.
4. If you are a smoker and want to quit, ask some of the patients to join you in a cessation program or activity.
 5. Be aware of specific ways the US is trying to decrease tobacco use:

The U.S. Department of Health and Human Services (HHS) has established a national toll-free quit line, 800-QUIT-NOW, to serve as an access point for any smoker seeking information and assistance in quitting.

Sources: CDC Tobacco Fact Sheets, America's Health Rankings 2017 Annual Report, Kentucky Cancer Program, KentuckyHealthFacts.org

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