

Pilot implementation of a motivational incentive smoking cessation program for rural Medicaid patients

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BACKGROUND

Smoking cigarettes continues to be the leading cause of preventable disease and death in the U.S.¹

24% of Medicaid recipients nationally smoke. 40% of Medicaid recipients in Michigan smoke.²

Despite Medicaid coverage of smoking cessation services and most people who smoke wanting to quit, high smoking levels persist.

Motivational-incentive smoking cessation services result in 2.5 times higher likelihood for quitting smoking than those who did not have those interventions.³

Barriers to implementation include patient and provider **burden of frequent in-person visits** and the **lack of promotion** for these smoking cessation services.

Objective: to address and reduce barriers to motivational incentive treatments and associated disparities in smoking rates within rurality and low-income populations.

METHODS OVERVIEW

A pilot quality improvement project, **Incentives2Quit (I2Q)**, was established in partnership with the Michigan Department of Health and Human Services to address disparities in smoking cessation care.

N = 37 Medicaid patients who smoke self-referred and enrolled in a 5-week smoking cessation program.

7 Federally-Qualified Health Centers (FQHCs) in Michigan.

Enrolled patients received the following for their participation:

- Daily tailored motivational messages to quit smoking.
- Monetary rewards with program engagement, submitting smoke negative samples, and completing up to 4 MI Tobacco Quitlink phone sessions.

WHAT IS INCENTIVES2QUIT?

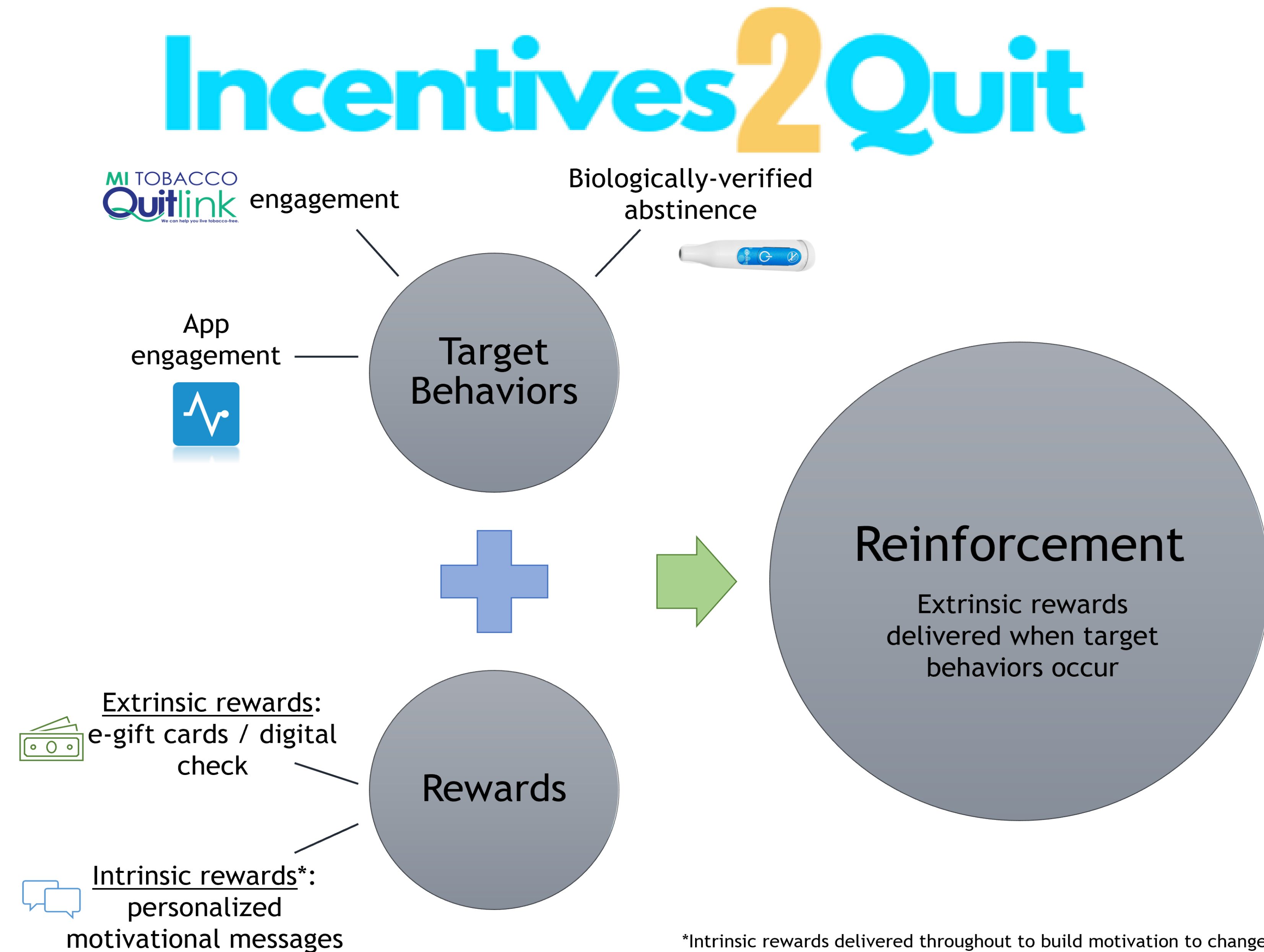


Figure 1. I2Q conceptual model. The combination of target behaviors and rewards reinforces successful smoking cessation.

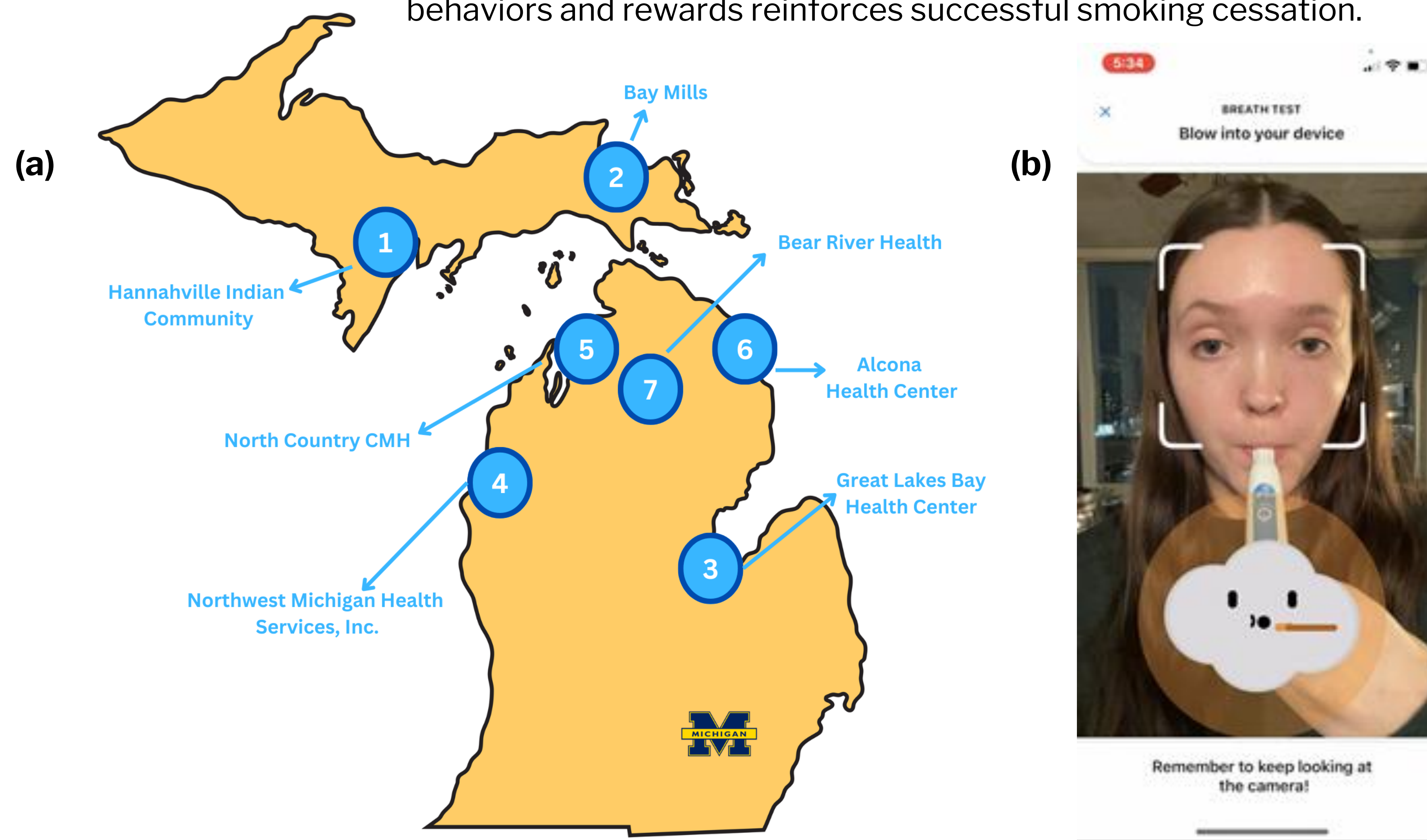
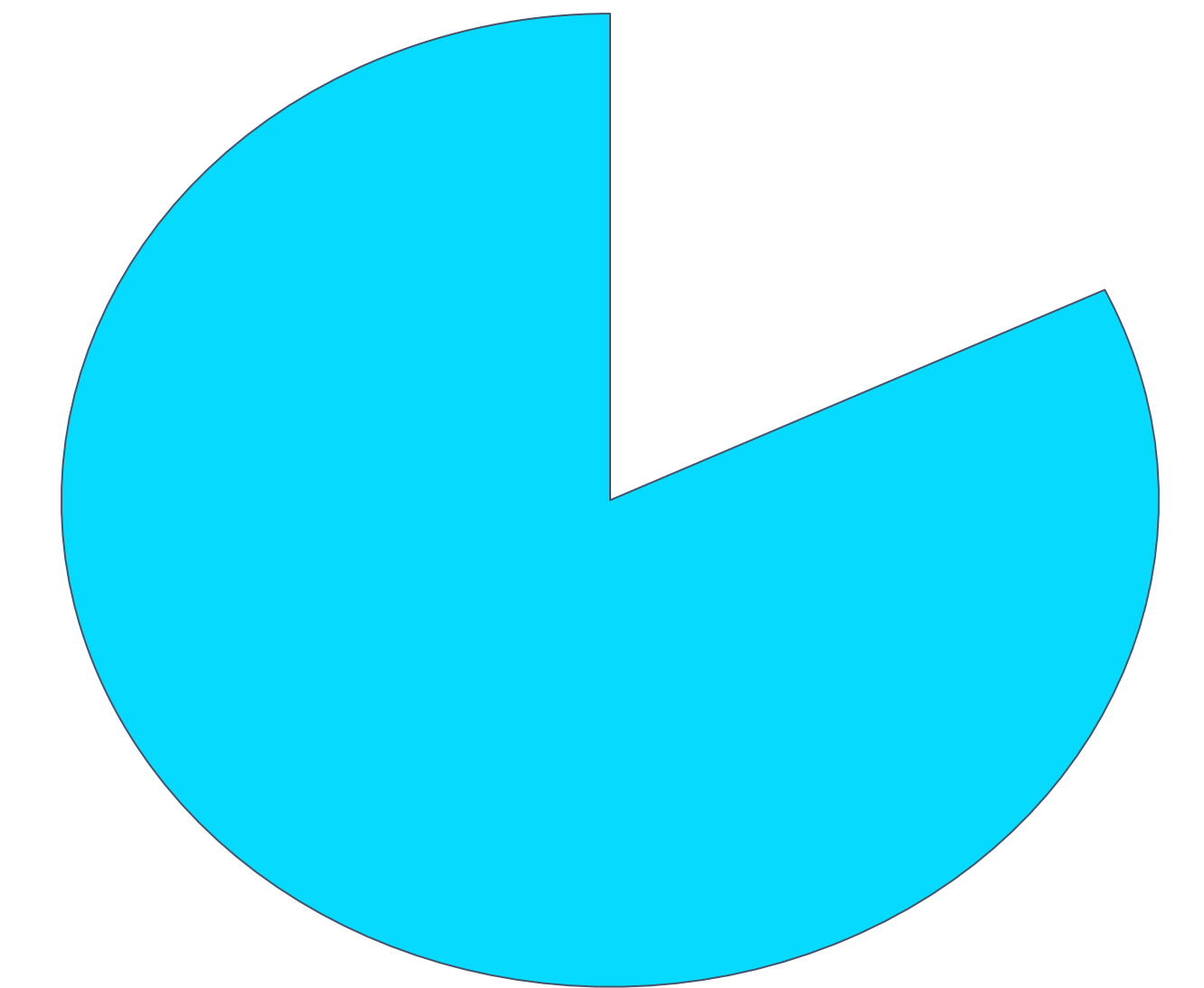


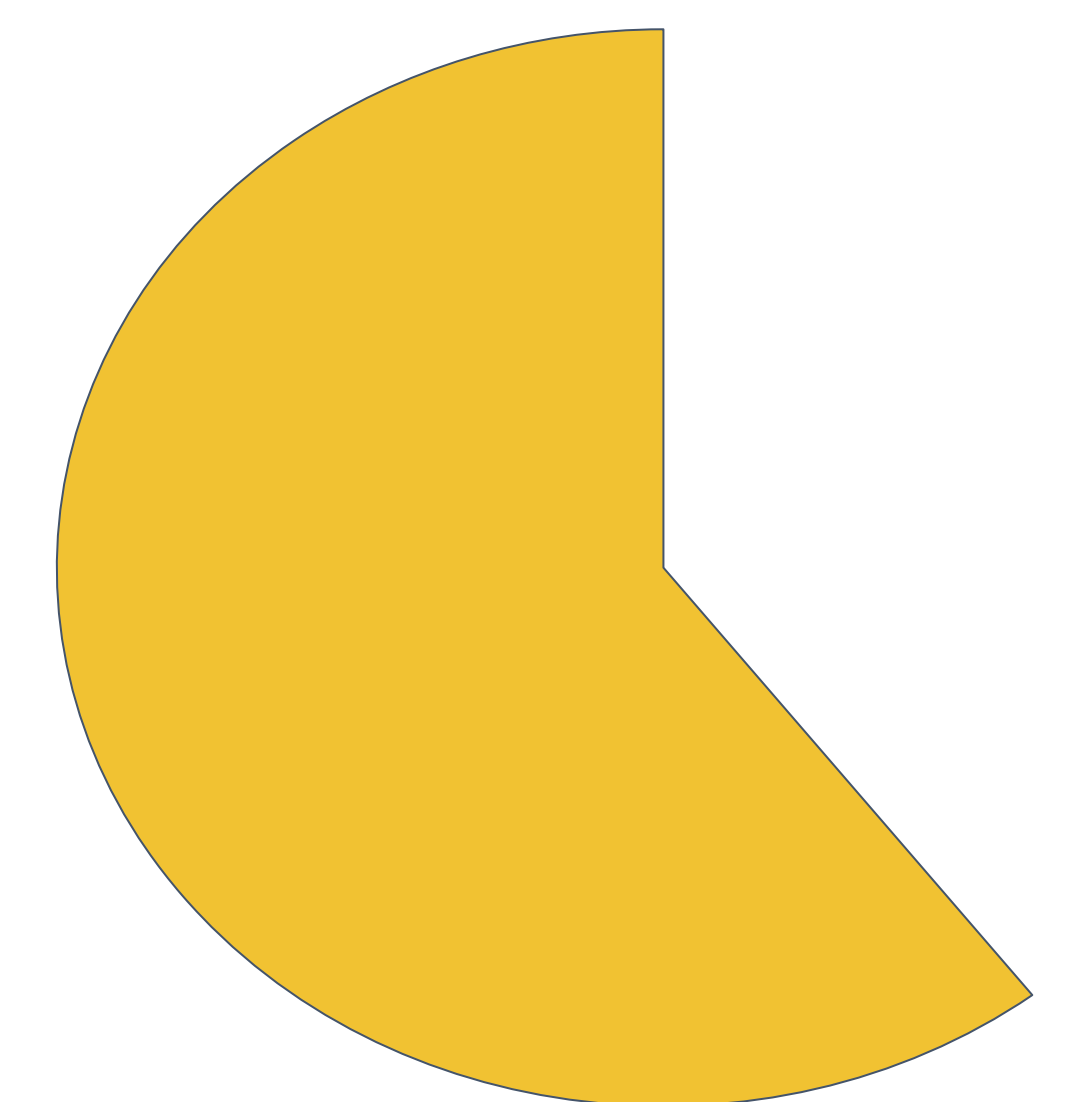
Figure 2a. Partner clinics across Michigan that had patients participate in I2Q.

Figure 2b. App-based biochemical abstinence verification check.

SUMMARY OF RESULTS



77% of patients **reduced their smoking levels** at the end of the program.



61% of patients **quit smoking** (CO ≤ 6 ppm) at the end of the program.

100% of patients **would recommend I2Q** to other patients who smoke, and **91%** found the **daily tailored motivational messages** to be **helpful**.

DISCUSSION & CONCLUSION

Patients found I2Q **acceptable** and **feasible**.

8% of people are successful in a given quit attempt, but preliminary I2Q data shows a promising increase in quit rates.⁴

A **1%** decrease in smoking rates in Michigan Medicaid patients can save Medicaid nationally **\$48.1 million** on smoking-related illnesses.⁵

Motivational-incentive treatment programs enhance effectiveness with highly complex patient populations.

