Alaska Medicaid Tobacco Treatment Coverage

Pharmacist's Guide Prepared by State of Alaska Tobacco Prevention and Control Program

Tobacco dependence should be treated as a chronic disease. Even without providing medications, a brief interactive counseling intervention can **double** quit rates among tobacco users who want to quit.

For cessation counseling reimbursement, the pharmacist must:

- I. Receive an order from a prescriber for tobacco cessation medication; and
- 2. Receive an order from a prescriber for tobacco cessation counseling; and
- 3. Have documentation (at the pharmacy) of having participated in a continuing education presentation on tobacco cessation; and
- 4. Provide the counseling in person, at the time that medication is being dispensed; and
- 5. Counsel for at least three minutes and up to 10 minutes; and
- 6. Keep readily retrievable notes. At a minimum, document the recipient's name, date of birth, date of counseling, and details of the counseling in a SOAP (Subjective, Objective, Assessment, and Plan) note format.

Treatment Coverage

- I. Prior authorization is no longer required
- 2. Maximum quantity limit set for tobacco cessation medications for no more than a 6 month time period:*

Nicotine Gum:	2,079 units / 6 months
Nicotine Lozenges:	2,520 units / 6 months
Nicotine Patches:	180 patches / 6 months
Chantix:	360 tablets / 6 months

*Accommodates maximum daily utilization of a product for 3 months followed by a tapering period of no more than 3 months.

Bill Alaska Medicaid by Point Of Sale (POS) for Tobacco Cessation Counseling services as a part of tobacco cessation medication dispensing **no more than once monthly:**

Field Description	NCPDP Field	NCPDP Code (Required)
Incentive amount submitted	438-E3	\$16 (maximum allowed) http://manuals.medicaidalaska.com /pharmacy/pharmacy.htm (search for tobacco)
Gross amount due	430-DU	Be sure to add the ''incentive amount submitted'' to the sum of all charges in order to receive payment

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Pharmacist's Guide

Tobacco treatment is the most effective clinical intervention available today to reduce illness, prevent death, and increase quality of life.

Did you know?

Chances of quitting successfully are **four times** higher with medication and counseling.

Nationally, the Medicaid population smokes at a higher rate (34.8%) than the general adult population (20.8%) (National Health Interview Survey 2006).

Alaska Medicaid recipients often do not know about treatments available to them.

Alaska's Tobacco Quit Line, I-800-QUIT-NOW (784-8669), provides free individualized counseling and NRT for all Alaskans before, during, and after the quit date.

Some Key Counseling Tips

- Set a quit date (total abstinence within next 2-4 weeks)
- Review past quitting experience
- Anticipate challenges to upcoming quit attempt
- Set clear boundaries if there are other smokers in the houshold
- Limit or abstain from alcohol while quitting

For More Information

Online Pharmacist Tobacco Training http://www.akcache.org (search for Smoking Cessation 101)

For a free online brief tobacco intervention training, visit www.akbriefintervention.org

Tobacco Cessation Therapy Guidelines for Pharmacists http://manuals.medicaidalaska.com/pharmacy/pharmacy.htm (search for tobacco)

Prior Authorization http://dhss.alaska.gov/dhcs/Pages/pharmacy/medpriorauthoriz.aspx

Magellan Clinical Call Center (800) 331-4475 — The call center can assist providers with claims processing issues and is staffed 24 h x 7 days a week.

