

**MAKE
IT YOUR
BUSINESS:**

Insure a tobacco-free workforce

EMPLOYER'S TOOLKIT

TOFCO


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Insure a tobacco-free workforce

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Congratulations! Clearly, you are an Oregon employer who cares about the men and women who work for you. Thank you for your interest in helping your employees quit smoking or chewing tobacco.

You and I know that tobacco causes disease and death. Most of us have felt the pain of watching family members, friends, or co-workers suffer from tobacco-related diseases. Smokers huddling outside to smoke remind us daily of the impact of tobacco addiction on employee productivity. And some of us have done the math to see how tobacco use in the workforce affects our bottom line.

The Employer's Toolkit makes a strong case for helping employees quit tobacco, and provides a step-by-step guide for those of us who want to "make it our business" to insure a tobacco-free workforce. I encourage you to peruse this toolkit for information and resources that apply to your workplace and situation.

This toolkit is divided into two parts: "**Cover It!**" makes the case for providing tobacco cessation benefits or services, informs you about what help is most effective, and shows which Oregon health plans cover these kinds of assistance. "**Promote It!**" gives you tools to promote the tobacco cessation benefits or services you provide and suggests programs that support your employees who are trying to quit. Both sections show how other companies have made a difference to employees who want to quit smoking.

If all of us work together on this important issue, we not only will build a healthier, more productive community, we will play a part in bridling runaway health care costs. This campaign is funded by the American Medical Association's SmokeLess States Initiative and is spearheaded by the Tobacco-Free Coalition of Oregon.

I look forward to working with you on this important cause.

Best Regards,



Peter Kohler, M.D.
Advisory Committee Chair

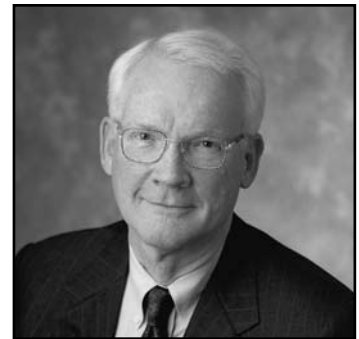


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COVER IT!

This section includes information about what you can do about the single-most preventable cause of premature death and disability—tobacco use. You will learn how nicotine addiction affects your business, with formulas that enable you to estimate the toll of tobacco on your company.

Take a few minutes to compare what you now spend on tobacco-related illness with the cost of providing effective tobacco cessation services for employees. Then, consider the kinds of help that can double or triple your smokers' chances of successfully quitting. Look in the resources section to identify which Oregon insurance companies help smokers who want to quit.

Finally, read about other companies who decided to "make it their business," and consider your next steps in insuring a tobacco-free workforce.

Cover It!

Any smoker will tell you, it's hard to quit. Most smokers want to quit¹ and try every year.² Most try on their own and have no access to help.³ They are two to three times more likely to succeed when they get help than when they don't.⁴

Businesses like yours, particularly when facing skyrocketing health care costs, need to carefully weigh changes in benefits or services. In making decisions about change, consider why helping smokers quit is an investment in a healthy and productive workforce that can produce bottom-line results.

10 reasons to help people quit tobacco

- 1.** Health care costs for smokers at any given age are as much as 40 percent higher than those for nonsmokers.⁵
- 2.** The average smoking employee spends a total of 18 days a year on smoking breaks.⁶
- 3.** On average, smokers cost company drug plans twice as much as nonsmokers.⁷
- 4.** Cost analyses have shown tobacco cessation benefits pay for themselves and can save employers money after a few years.⁸
- 5.** Smokers are absent from work for sickness at least 26% more than nonsmokers.⁶
- 6.** Smoking is the leading preventable cause of premature death and disability^{9,10} in the United States. Businesses pay higher life insurance premiums for smokers. And smokers are subject to more disciplinary actions and are at greater risk of occupational injuries.¹¹
- 7.** Smoking is a risk factor for many chronic diseases, including asthma, cancer, heart disease, and chronic obstructive pulmonary disease.⁴
- 8.** Smoking during pregnancy is the most important preventable cause of poor pregnancy outcomes, resulting in low birth weight, perinatal mortality and sudden infant death syndrome. Medical costs of complicated birth are 66 percent higher for pregnant smokers than for pregnant nonsmokers.¹²
- 9.** Children exposed to tobacco smoke are at increased risk of respiratory illnesses, middle-ear infections, and decreased lung function.¹² Health care costs for a privately insured child of a smoker average \$174 more per year than the child of a nonsmoker.¹³ Employers pay these costs and for the reduced productivity, as parents care for sick children.
- 10.** Helping adult smokers quit is one of 20 national priority areas for health care quality improvement chosen by the National Institute of Medicine.¹² It is the most cost-effective preventive service that can be provided to employees.¹⁴

Tobacco use costs business

Whether or not you choose to address tobacco use in the workforce, you pay for it. Some companies, like Chevron, measure the impact of tobacco use on health care costs. These costs represent about half of tobacco's financial burden to business.

Chevron tackles top risk factor—tobacco

Chevron, a California-based company with 37,000 employees, won the C. Everett Koop Award for worksite health promotion for its focus on tobacco cessation. The company found that it spent about \$4 million per year on tobacco-related illnesses—more than on any other risk factor. Since 1991, Chevron has reduced the number of employees who smoke by 43 percent.

Company personnel educated health insurers on how to effectively monitor and treat tobacco use and addiction. They measured how each insurance company provided these services and demanded necessary improvements. Finally, Chevron structured an internal program with the kinds of counseling and medications proven to be most effective.¹⁵

How much does tobacco cost you?

The cost of tobacco cessation in Oregon, pennies on the premium dollar, is far less than the cost of tobacco-related disease.¹⁶

A single case of heart failure in Oregon—a condition more than twice as likely in a smoker than a nonsmoker—costs an average of \$23,234 a year in medical expenses, or \$5.23 per member per month.

Care for a low birthweight baby for a year, on average, costs \$27,776 per year, or \$1.74 per member per month. Some 20 percent of low-weight births, 8 percent of pre-term deliveries, and 5 percent of all perinatal deaths are linked to smoking during pregnancy, making smoking the primary preventable cause of poor pregnancy outcomes, according to Smoke-Free Families.

A single case of lung cancer costs \$42,045 per year, or \$1.91 per member, per month. Smoking causes 87 percent of all lung cancer cases, according to the American Lung Association.

You also pay for many indirect costs of smoking—longer breaks, more absenteeism, the impact of second-hand smoke on children. Health care costs for a smoker's child, covered by private insurance, averages \$174 per year more than for a child of a nonsmoker.¹³

By comparison, effective treatment to help smokers quit costs about 29 cents per member per month. For the cost of one heart attack, you could buy a year's worth of tobacco cessation benefits for 6,638 employees and dependents.

See Resource C for a worksheet that can help you calculate the costs of smoking-related diagnoses at your workplace.

Studies show that tobacco use costs more than \$3,500^{17,18} per smoker per year when you factor in:

- Greater health care costs
- Increased absenteeism
- Work time spent on smoking rituals
- Higher life insurance premium costs
- Greater risk of occupational injuries
- Costlier disability
- More disciplinary actions

Do the math

Number of employees: _____

% of smokers
or 18% of employees¹⁷
(average Oregon rate) _____

Cost per tobacco user: x \$3,500

Total cost per year: _____

Help employees quit

Since your company already pays when people use tobacco, why not come out ahead and provide the help employees want and need to kick their addiction?

In 1988, Surgeon General C. Everett Koop declared tobacco use an addiction.¹⁹ Research testifies to the grip of nicotine in tobacco. More addictive than heroin or cocaine, nicotine changes the brain's chemistry and becomes necessary in the life of a tobacco user. Once inhaled, nicotine reaches the brain in seven seconds, affecting thought processes and changing moods.¹⁹ Tobacco users become dependent upon nicotine's effects when they take smoking breaks at work and smoke or chew when feeling stressed or while driving, relaxing or engaging in other activities.

Thus, when people quit tobacco, they not only face the physical challenges of withdrawal, they must also change their daily rituals and stress relievers. Within hours of quitting, they experience cravings, anxiety, frustration, irritability, loss of concentration, increased heart rate, fatigue or light-headedness. Although most of these symptoms disappear within three weeks, the urge to smoke can recur for months and even years.²⁰

Research shows that the most effective help includes medications to treat the withdrawal symptoms of quitting and counseling to help develop new ways to cope with the behavioral and psychological effects. Yet nearly two-thirds of Oregon's adult smokers do not have insurance that covers these services.^{3, 21, 22, 23}

Companies committed to a tobacco-free workforce can take different paths to achieve this goal. Those who have been most successful make a commitment to becoming tobacco-free, then devise strategies and measurements to continually improve how they help employees quit.

Review the health benefits or services you provide

Do you know what your company offers to help tobacco users quit? Find out whether your company offers cessation benefits or services and whether the design is based on scientific evidence.

The most effective treatments includes counseling and medications. Furthermore, the design of the benefit will affect how well you can help tobacco users stop.

Design assistance that effectively helps people quit tobacco

Counseling^{4, 24}

Evidence shows that person-to-person counseling works best for helping people quit tobacco.

- Person-to-person counseling—individual, by telephone*, or in groups—is most effective. Services that provide only educational or self-help materials have not been shown to be effective.
- Smokers are more likely to use telephone counseling than participate in individual or group counseling sessions.
- The effectiveness of counseling increases with more or longer sessions.

Resource H provides information about the Oregon Tobacco Quit Line and its link with private insurers and companies.

Medications^{4, 12}

The Food and Drug Administration has approved six medications to help people quit tobacco. Some may be purchased over the counter. Others require a prescription. Some are available in generic form.

- The five nicotine-replacement therapies relieve withdrawal symptoms and are available in different forms, including gum, lozenges, nasal spray, inhaler, or patch. All forms have been found effective. Costs can vary significantly.
- The sixth medication, bupropion SR (sustained release), reduces withdrawal symptoms and the urge to smoke.

* Effective telephone counseling programs offer one-on-one education and support by counselors trained to help people quit tobacco. When tobacco users are ready to quit, they can arrange at least four counseling sessions, timed to coincide with their schedules and with the withdrawal process. In addition, the counselor can be called when extra support is needed. Some insurance companies and corporations contract with firms, including the Seattle-based Free & Clear program, the Minneapolis-based Mayo Health Clinic or the Austin, Texas-based American Cancer Society, to provide these services. These contracts can include nicotine-replacement medications mailed to the person using the services.

Benefit design²⁴

Tobacco-cessation benefits that have been found most effective do the following:

- Pay for counseling and medications, together or separately.
- Cover counseling services, including telephone and individual counseling. While classes are also effective, few smokers attend them.²⁵
- Offer several counseling sessions over a period of several weeks to be most effective.
- Offer the FDA-approved medications, including both prescription and over-the-counter nicotine-replacement medication, and bupropion.

FDA-Approved Prescription and Over-the-Counter Tobacco Cessation Medications

Type	Form	Common Brand Name(s)
Nicotine- Replacement Therapy	Gum	Nicorette®
	Patch	Nicoderm® Habitrol® Prostep® Nicotrol®
	Inhaler	Nicotrol®
	Nasal Spray	Nicotrol®
	Lozenge*	Commit®
Bupropion SR	Pill	Zyban® Wellbutrin®

Resource B lists Oregon insurance plans that offer tobacco cessation.

Show tobacco users you want to help them quit and understand the chronic nature of tobacco dependence by designing a benefit that makes it easier for them.

- Require employees to pay no more than the standard copayment. Data show that smokers rarely use cessation services inappropriately and are much more likely to quit when no copayment is required.²⁶
- Provide at least two courses of treatment—both medication and counseling—per year.

How much would an effective tobacco-cessation benefit cost you ?¹⁶

Number of employees : _____
 29 cents per member, per month** : x\$3.48
 Total cost per year: _____

**Cost of pharmacology and/or telephone counseling, assuming the standard copay and 5 percent employee use.

* Received FDA approval on October 31, 2002; therefore not addressed in the 2000 PHS Guidelines.

Monitor the effectiveness of your programs

While science provides evidence of what helps people quit tobacco, you and those you work with are the experts on your workforce and circumstances. Here are stories of two companies who pioneered the concept of "making it their business" more than a decade ago. Each started with a champion or two. Both monitored the effectiveness of how they helped people quit tobacco, changing their benefits and services accordingly.

Union Pacific Railroad, a company with a high incidence of smoking and more than 50,000 employees constantly on the move, decreased smoking from 40 percent to 25 percent over an eight-year period.²⁷ The company, which carefully monitors employee risk factors, has a 37 percent success rate for employees quitting smoking.²⁸

The company's policies evolved from designating smoking areas in 1987 to prohibiting on-site smoking in 1999. Meanwhile, Union Pacific continually improved the help they offered employees. In the early 1990s, the company pioneered telephone counseling to help people quit smoking. In 1999, the company combined counseling with Zyban as part of a study. Now, a combination of counseling and Zyban are covered by the major union health plans. Union Pacific is expanding Zyban coverage to all health plans and intends to include tobacco-cessation benefits and services to nonunion employees and those not covered by health plans.

Union Pacific's assistant vice president for health services attributes the company's success to a company-wide commitment to smoking cessation as one of the major business objectives.

The company in 2002 was recognized for its Health Track and System Health Facility program. Health Track helps employees assess 10 health risks, including smoking, and encourages program participants to change their behaviors to eliminate those risks. More than 17,000 employees participate in the program.²⁸

Health plan spurs changes, boosts success

Group Health Cooperative in Seattle, a 500,000-member health maintenance organization, saw positive results after it made reducing tobacco use its top priority. Successes include fewer smokers, more quit attempts, and reduced use of inpatient and outpatient health care services. Smoking prevalence in enrollees declined from 25 percent to 15 percent between 1985 and 1994.

Again, management commitment was a key factor in the group's success. Senior leadership, including the CEO and medical director, made reducing tobacco use the company's top prevention priority.²⁹

As a result of constant measurement and analysis, Group Health saw the wisdom in making it easier for smokers to quit. Guided by data, they removed copays for counseling, significantly cut the cost of medications, removed geographical barriers, and simplified paperwork.³⁰

The proportion of patients enrolled in Group Health's formal quitting program and the quit rate rose substantially with the elimination of copayments.³⁰ Compared with continued smokers, quitters who took part in Group Health's self-help program used significantly fewer inpatient and outpatient health care services three to five years after quitting.³¹

Take the next step

After reviewing what your health plan provides, consider your next steps. You could:

- Assemble a team within your organization committed to developing a tobacco-free workforce.
- Measure the toll of tobacco on your company. How many employees use tobacco? What is the estimated impact on your company in terms of health care costs, absenteeism, smoking breaks, life insurance, disability, workforce harmony, industrial accidents and disciplinary action?
- Talk to your insurance consultant or broker about benefits, riders, products or discounts designed to help employees quit tobacco.
- Add coverage for the counseling and medications that have proven most effective in helping tobacco-users quit.
- Determine ways to make tobacco-cessation benefits more accessible. Limit employee costs by waiving or reducing them to no more than the standard copayment. Offer at least two courses of treatment per year.
- Expand tobacco-cessation benefits to both employees and spouses as a way to encourage more support for quitting.
- Establish systems to measure what you do and the impact of any changes you make.

Resource D is a checklist that can guide your next steps.

“Many employers do not realize the relationship of the employees’ health to corporate performance. While striving to contain the rising medical costs that put them at a disadvantage against global competitors, they are missing the competitive advantage their company can gain from investing wisely in the health—and thereby, the productivity—of their work force.”

--Health & Productivity Management, March/April 2001

Oregon Champion

ESCO Corporation, a Portland-based global steel parts manufacturing firm, was founded in 1913. It employs about 700 people in Oregon and 2,500 worldwide.

Impact of tobacco

About one-third of ESCO's Oregon workforce smokes. Quite a few, particularly those in their 30s, chew tobacco. While some employees grumbled when the Smokefree Workplace Law was implemented in 2002, the company has seen improvements in its Portland operation.

In days gone by, old-timers frequently worked with cigarettes in their mouths—a common practice in manufacturing. As a result of Oregon's Smokefree Workplace Law, many who previously smoked at their work stations had to smoke in designated outdoor shelters. This reduced some of the conflict between those who smoke and those who do not. Some non-smokers still complain that "smokers get more breaks." Maintenance managers and custodial staff, however, note that work areas are easier to clean.

Help for tobacco users

ESCO offers Oregon employees three health plan options, all of which include in-person or telephone tobacco-cessation counseling and medications. The programs are free or cost employees the equivalent of the standard copay. (Employees in Mississippi and Kentucky smoke more, report more tobacco-related health problems, and do not have access to health plans with cessation services to the degree that their fellow employees in Oregon do).

When ESCO implemented the Smoke-free Workplace Law, the company offered employees a financial incentive to quit—an offer seized by a handful of workers. Through Karin Drake, ESCO's Health Services Manager, ESCO has recognized employees who quit smoking with a fruit basket after they remain smokefree for six months. Every November, around the time of the Great American Smokeout, ESCO publicizes its tobacco-cessation programs.

Corporate benefits manager Patrick Pine, a former smoker, wants to encourage smokers to quit and advocates that businesses consider it in their interest to assist those who attempt to quit. Businesses, he says, will see greater productivity, a safer, cleaner work environment, less interpersonal conflict and a healthier workforce. He urges managers to recognize that it can be difficult for smokers to successfully quit on the first attempt. He cautions that incentive systems should recognize hurdles that deter smokers from attempting to quit. He suggests that even one person successfully quitting likely will generate savings and benefit that far exceed an employer's investment in smoking cessation.

Interviewees: Patrick Pine, Corporate Benefits Manager
Karin Drake, RN, Health Services Manager



PROMOTE IT!

In Oregon, 80 percent of the privately insured smokers say they want to quit.¹ About 39 percent of them have benefits or services to help them.³ But only 11 percent are aware of any kind of help from their insurer.¹

Common sense, as well as national and local studies, affirm that smokers—however motivated to quit—will not use benefits or services they know nothing about. A 2002 study in Minnesota found that the mere presence of a pharmacy benefit did not increase smokers' use of those benefits or their quitting rates.³² With so few people aware of the benefits they have, it's not surprising they are not taking advantage of them.

This section of the tool kit provides a step-by-step strategy you can adapt to promote cessation benefits or services at your workplace. Resources and sample materials are provided in the next section.

Promote It!

Beyond providing cessation benefits, the most important thing you can do is steer employees toward help. Employees need to know what help is available to them. In this chapter, you'll learn the steps to effectively promote the tobacco-cessation benefits or services you provide.

Step One: Conduct research

1. Assess current tobacco use

If you want to judge your program's effectiveness, you'll need up-front data. Survey employees to find out how many use tobacco. In some cases, employers also can gauge smoking levels through life insurance records, as life insurers charge additional premiums for smokers. The average smoking rate in Oregon's commercially insured population is 18 percent. But in some professions, including blue-collar trades, smoking rates are more than double the average.³³

2. Find out what benefits you offer

Employers are often surprised that tobacco cessation, though a standard measure for quality care³⁴, is not a standard benefit in many health plans. Effective health care benefits include medications and counseling or classes with little or no co-payment.

Resource B lists which Oregon health plans provide tobacco-cessation services.

If your company is self-insured or if your insurance company is not listed, check with your human resources department or insurance agent to find out your benefits, deductibles, and limitations for tobacco cessation.

3. Find out what your employees think

Before you promote tobacco-cessation help, find out:

- how many employees smoke, and if a particular work group smokes more than others;
- how many employees plan to quit within the next six months;
- what employees know about their tobacco-cessation benefits;
- where they prefer to get information about benefits and stop-smoking programs;
- quitting barriers they face, especially in the workplace;
- how you can help them quit.

This can be done with a written or web-based survey or a focused group discussion.

Resources E, F and G include a sample survey and sample focus group guides that can help you assess your workplace tobacco issues and design effective promotions.

Step Two: Prepare your messages

1. Prepare key messages

The two key messages most employees need to know are:

- help makes a difference;
- help is available (through benefits or services).

Smokers in focus groups say they are most interested in learning about the kinds of help you provide. Make this a key part of your message.

2. Provide information

You can provide other helpful information, such as:

- the phone number to the Oregon Tobacco Quit Line: 1-877-STOP (7867), which provides a free telephone consultation for people trying to quit and referrals to other cessation services offered by various health plans.
- local tobacco-cessation classes and support groups.
- stop-smoking tips and strategies.

Resource I lists websites that include stop-smoking strategies.

3. Use encouraging and hopeful messages

Don't forget the power of storytelling. Success stories of employees who have quit smoking can motivate others to try. Feature these employees in publications and other venues.

Step Three: Choose communication tools

In developing communication strategies, you'll want to answer these questions:

Who are you trying to reach? Since tobacco use may be spread through different departments in your company, you may want to use an array of strategies. But if you find tobacco use is more prevalent with certain groups, you may want to focus first on communications that reach those particular employees.

What is your message? Two key messages that employees need to know are: 1) help makes a difference, and 2) help is available (through benefits or services). Tell them what kinds of benefits or services you provide. This should be the prominent part of the "help is available" message.

When should you promote benefits and programs? Since people are ready to quit at different times, it is important to keep information about benefits and services in front of them regularly. A one-time information campaign will miss a lot of people who decide to quit smoking a year later.

Where do employees get information? This is an important question to ask in your employee research. While employees generally find information in a variety of places, find out their preferred places, particularly on issues concerning health and health care.

How should you promote tobacco cessation? Consider communications tools that reach employees in a variety of ways. Some employees prefer meetings and health fairs, while others would rather read a newsletter or website. Strategies you can adapt for your workplace are listed on the next few pages.

Timing is everything

People are ready to quit at different times, and the average smoker tries several times before quitting. That can be discouraging — for smokers, their families, their co-workers and their employers. A person who resumes smoking after trying to quit may be discouraged from trying again. That's why it's important to assure people that help is available when they are ready to quit. Persistence does pay off: Of those who try to quit, half will ultimately succeed.³⁵

Union Pacific makes sure the employee is ready to quit before enrolling them in its cessation program. "We've found they have to really be ready for it to work," says Marcy Zauha, director of health and safety. If they don't succeed the first time, Union Pacific pays for prescription medication a second time.

Common sense, research and testimony from smokers and former smokers tell us they are unlikely to quit until they are ready. Thus, accessible information about how to get help can catch a smoker when he or she is prepared to quit.⁴ Employers are well positioned to provide this information.

Suggested communication tools

Posters in the workplace

One popular way to reach employees is to post information on bulletin boards in the break room, cafeteria, copy room, restrooms or other shared areas in the workplace.

Consider displaying the posters in the back flap of this toolkit to encourage your employees to get help quitting tobacco. You'll find stickers you can customize with information about your workplace and examples of messages you may want to use.

Every month, Portland General Electric posts a one-page flier, titled "Stall Talk," on the inside door of employee restrooms. This colorful flier focuses on health and wellness topics, including tobacco cessation.

Information on the intranet

Most companies with internal websites include general information about health care benefits. Feature in a prominent place the tobacco-cessation benefits or services you provide. The intranet also is a great place to include general stop-smoking tips.

Resource I includes websites with information about how to quit smoking.

Providence Health System provides a wealth of resources available to its employees and members at

<http://www.providence.org/HealthPlans/Members/AwareandHealthy/WellnessandValueadded/SmokingCessation.htm>

The screenshot shows the Providence Health System website's Smoking Cessation Resource Center. The page features a navigation bar with links to Home, Health Plans, Providers, Programs & Services, Classes, Facilities, Health Information, Employment, and Donate. A search bar is located in the top left. The main content area is titled "Smoking Cessation Resource Center" and includes a "Health Tool" section with a "Ready, Set, Stop!" e-mail based program. A "Featured Today" section lists several resources, including the Oregon Tobacco Quit Line, the National Cancer Institute's Smoking Quitline, and the Providence Lung Cancer Expert. A sidebar on the left contains links to the Smoking Cessation Center Home, Recommended Links, Medical Library, and Health Information Home. A footer at the bottom provides contact information and a copyright notice for Providence Health System, dated 1997-2004.

You can keep a changing array of information in front of smokers with intranet messages and website information.

Company newsletter

Company newsletters can remind employees of the benefits or services available to them to help quit tobacco. They can feature success stories, provide news about stop-smoking seminars, quitline numbers and the like. Consider running a tobacco-cessation article at least once every quarter. (Remember, people are ready to quit at different times.) And don't forget company e-mail newsletters.

Resource J provides sample newsletter articles you can adapt for your needs.

Postcards, fliers, brochures

Some companies put postcards or fliers in employee mailboxes, or mail information to their homes, letting them know what benefits or services are available for employees.



Providence Health System promotes tobacco cessation to employees with this postcard.

Company meetings and presentations

Company-wide or group meetings are a good way to let employees know about the tobacco-cessation benefits available to them and their families. Make sure this information is highlighted in any company meeting about health benefits or wellness.

Wellness events, health fairs

Many companies have health fairs, wellness weeks and other regular events which provide opportunities to promote cessation services and benefits. Other companies plan special events or campaigns to coincide with annual days and observances that are natural times for people to quit tobacco, including:

New Year's Day (Jan. 1)

World No-Tobacco Day, (May 31)

The Great American Smokeout, (third Thursday in November)

Esco Corp. in Portland includes information about tobacco-cessation benefits at its annual employee health fair.

Co-workers help out at Medtronic

Medtronic, which makes health care equipment, supports a healthy workforce. Tobacco cessation has long been a key component of Medtronic's wellness focus. Medtronic uses the Great American Smokeout as a rallying time to get employees geared up to quit smoking. The entire company gets into the act – smokers and non-smokers alike.

The company gears up for the day by promoting it early and often through newsletters, the website and posters. Employees are encouraged to set the Great American Smokeout as their quit day. That day, classes and seminars are held to get people started. Benefits and services for smokers are heavily promoted. Everyone gets a free lunch. Mints, gum and toothpicks are well stocked. The company also offers cash incentives for employees who agree to "adopt" a co-worker and help them through the day as they're trying to quit.

Moral support and encouragement is a key ingredient in Medtronic's successful employee cessation program. Smokers are embraced.

Support from your health plan

Meet with health plan representatives to discuss how they can help you promote tobacco-cessation services to their members. They may conduct special mailings, host meetings for employees or develop other strategies to promote the benefits you pay them to provide.

Unions, associations

Consider enlisting others who communicate with your employees, such as unions or associations, to spread the message about cessation benefits and programs. They also have newsletters, meetings, websites and other communication vehicles where they can post information about employee services.

Closed-circuit television

Companies that have closed-circuit television are often looking for employee-friendly stories and information. This would be a great place to highlight a success story and feature information about tobacco cessation benefits or services.

Step Four: Evaluate and adjust

You will want to evaluate the effectiveness of your tobacco-cessation promotion as you would other company investments. Ask employees for advice, formally and informally. Consider surveying employees to determine if your promotion efforts have made an impact. Seek information, not only about tobacco use but also measuring employee awareness of benefits or services, attitudes toward company promotions, etc. Armed with this information, you can adjust your program to be as effective as possible.

Use resource L to plan how you will promote your tobacco cessation benefits or services.

Support It!

The work environment can provide an ideal support system for employees who want to quit tobacco. Former smokers talk about how co-workers, who share so much time with them, supported them through the arduous task of quitting tobacco.

To provide a supportive workplace, consider these actions:

Make sure your workplace is tobacco-free

Research shows that creating a tobacco-free workplace is one of the most effective things you can do to help employees stop smoking.³⁴ Smokers report that it is especially hard for them to quit when the workplace allows smoking. Furthermore, the inconvenience of trying to find a place to smoke (both at work and at home) has convinced many a smoker to give it up.

Oregon has a smoke-free workplace law, and while 95 percent of Oregon's workplaces are smoke-free, bars, bowling alleys and bingo parlors are exempt. Also, while smoking at the workplace is outlawed, many employers inadvertently support tobacco addiction by providing shelter for smokers. Chew tobacco is still allowed at some workplaces.

Many companies have established comprehensive tobacco-free workplace policies. Resource K provides a template you can adapt for your company.

A poster describing Oregon's Smokefree Workplace Law is included in the back pocket of this toolkit.

Identify and address barriers to quitting

Many smokers report that a stressful job keeps them smoking. Others say that smoking breaks provide them with a rare opportunity to socialize with co-workers. Smokers may say poor workplace air quality, lack of enforcement of the Smokefree Workplace Law or pressures at home keep them from quitting.

By conducting an employee survey or focus group, you can identify what keeps employees from quitting. Then you can begin to address those barriers.

Wellness programs, formal or informal, can help employees focus on their health, deal with stress, and find social outlets other than smoking breaks. Companies that emphasize wellness in all aspects of employees' lives find that the resulting culture can encourage employees to quit tobacco.

Support quit attempts

Many companies support employees trying to quit. Companies, small or large, can create an atmosphere where employees can feel supported as they break their addiction to tobacco.

Throughout the worksite, Medtronic provides hard candy, mints and toothpicks that smokers can pop in their mouths, in place of a cigarette.

Union Pacific provides coaches for people who are trying to quit. Former smokers can play this role. Smokers say they prefer the support of former smokers who can relate to their addiction; they resent being "lectured" by people who have never smoked.

Slumberland, headquartered in New Canada, Minn., has provided workshops on becoming tobacco-free and rewards for employees who attend—whether or not they smoke. This encourages everyone to learn more about tobacco, and also helps reduce any stigma associated with attending the sessions.

Union Pacific tailors program to needs

In the late 1990's, in the course of conducting a safety study, Union Pacific Railroad discovered that smoker's significantly impacted their safety statistics. The company set smoking cessation as a major business objective, launching a comprehensive campaign titled "Butt Out and Breathe."

In eight years, the proportion of Union Pacific employees who smoked dropped 15 percentage points, from 40 percent in 1993 to 25 percent in 2001. What's more, 37 percent of smokers who attempted to quit were successful in that attempt.

Marcy Zauha, director of health and safety for Union Pacific, attributed this progress to:

- Working with individual employees to determine readiness and set a target quit date;
- Providing a wide range of options to support employees in behavior change;
- Fostering a supportive, encouraging approach among managers and co-workers;
- Providing access to prescription medications;
- Using personal progress surveys to support those attempting to quit.



Union Pacific's first step was to implement a smoke-free workplace, including in or near building entrances and at off-site meetings and events. Then, the company worked with the health plan carriers to include access to the prescription drug, Zyban, as an employee benefit.

But Union Pacific didn't stop there. The company created a toolbox of direct behavioral, one-on-one interventions and support that includes:

- A health risk appraisal
- An individual health coach
- Face-to-face counseling
- Self-directed workbooks
- Mentor training
- Telephone counseling
- Internet counseling
- Employee education and empowerment

"We found it's important to tailor the program so that it fits with each employee's lifestyle and preferences," Zauha said. For example, one employee may choose Zyban and telephone counseling, while another opts for nicotine-replacement therapy and group sessions. Union Pacific provides "coaches" to get smokers through the toughest times. "Not everyone may want that. They may prefer a confidential helpline," Zauha said. "The point is, there's more than one way that works, and we do our best to find what's best for each person."



Union Pacific posts motivational messages for employees on match books.

RESOURCES

This section provides tools you can use to cover and promote effective tobacco cessation benefits for your employees. These include:

Resource A: Frequently Asked Questions

Resource B: Tobacco Cessation Covered by Oregon Insurers

Resource C: Calculate Your Company's Tobacco Liability

Resource D: Cover It Checklist

Resource E: Sample Employee Survey

Resource F: Sample Focus Group Guide, Tobacco Users

Resource G: Sample Focus Group Guide, Those Who Do Not Use Tobacco

Resource H: The Oregon Tobacco Quit Line

Resource I: Useful Web Sites

Resource J: Materials You Can Use

Resource K: Model Smoke-free Policy

Resource L: Promote It Checklist

Rear Pocket: 1) Posters for your workplace
2) Instructions to customize posters
3) Stickers
4) Oregon Smokefree Workplace Law Posters

Resource A: Frequently Asked Questions

Is the Make It Your Business campaign pushing to mandate tobacco cessation services?

Quite the contrary. This voluntary, community-wide effort aims to persuade businesses and insurers to routinely provide a service that has been identified by the prestigious National Institute of Medicine as one of the 20 priorities for transforming health care quality in the United States. The Make It Your Business campaign stresses the value of covering and promoting tobacco cessation benefits, emphasizing that broad adoption will improve and expedite the health and financial benefits to the entire community.

The Make It Your Business Advisory Committee includes business leaders, insurance company executives and benefits consultants who have opposed mandated benefits in the past. Their willingness to lead the state and nation in this pioneering campaign speaks to the value of tobacco cessation—deemed "the gold standard of preventive services."

Why should I invest in helping an employee quit smoking, when that employee will probably work for someone else in a few years?

The first return on your investment will be your employee's increased productivity. Former smokers take shorter breaks, use fewer sick days, and are generally more energetic than those who smoke. They also will take fewer days off to take care of children suffering from respiratory illness exacerbated by second-hand smoke. Human resource executives notice fewer conflicts between smokers and nonsmokers in a tobacco-free environment.

The issue of employee turnover becomes less significant when tobacco cessation services are a standard of care adopted by the entire community. The Make It Your Business campaign aims to encourage employers and insurers to universally offer tobacco cessation—a move that not only would speed up the return on investment for everyone, but would create consistent clinical pathways, maximizing the ability of all health care providers to help smokers quit.

No matter what my small company does, our health insurance premiums rise. Why would I add anything when I reap none of the savings?

Again, you will reap similar productivity savings as the above employer. Furthermore, you'll be part of a community-wide effort that will result in longer-term savings, which should be reflected in fewer doctor visits, fewer inpatient and outpatient hospital days, and, eventually, a reduction in the community rating.

Isn't tobacco cessation covered by most insurance plans?

Oregon is one of four states that offers evidence-based counseling and medications through Medicaid. Tobacco cessation services, the second highest priority for clinical prevention services (childhood vaccination ranks first), are in the top third on the state's priority list for the Oregon Health Plan.

Several of Oregon's commercial health plans—Kaiser Permanente, Providence Health Plans, and Pacificare—also routinely cover the counseling and medications shown to double or

triple a smoker's chances of successfully quitting. HealthNet provides telephone counseling for members. And some self-insured companies offer tobacco cessation benefits or services.

However, more than 60 percent of the commercially insured smokers are not covered for the help shown to be most effective in helping them quit. Officials from plans that do not cover cessation cite a lack of demand as the primary reason they do not provide these benefits.

Find out if your employees can get help quitting tobacco through your company coverage. If so, promote these services. If not, ask your human resources manager, broker or insurer to negotiate for the counseling and medications that can double or triple a smoker's chances of successfully quitting.

Why should non-smokers pay to help someone quit?

All of us share the financial burden for tobacco-related illnesses. By investing in a tobacco-free workforce and educating all employees about effective ways to address nicotine addiction, an employer can reduce everyone's financial burden and create a healthier, more productive and harmonious workforce. Research shows that smokers view cost as a barrier to participating in stop-smoking programs. Research about health care quality identifies tobacco cessation counseling as an underused service. An effective benefit will entice use of this service to help smokers stop smoking, rather than discourage them from trying.

Many of the smokers I know try to quit and, before too long, I see them lighting up again. Why should I pay when it seems like they really don't want to quit?

Eighty-one percent of Oregon's commercially insured smokers say they want to quit. Most of them started smoking as adolescents and, since then, have tried to quit and failed. Certainly, by bankrolling their cigarette money, they could pay for the help they need in relatively short order. But, because of the nature of addiction and smokers' fear of failure, most view the cost of treatment as a barrier.

Experts suggest adopting another perspective: Try thinking of nicotine addiction as a chronic disease. While it often takes multiple tries for a smoker to quit, each attempt can provide insights into strategies or interventions for a particular patient. Virtually no one would suggest, for instance, curtailing benefits for someone whose diabetes or hypertension was out of control. Rather, they would encourage, support and provide alternate medications and strategies to address the condition. Experts suggest taking this chronic disease approach with smokers who want to quit.

Doesn't the Master Settlement Agreement with the tobacco companies cover this kind of thing?

No. In 1998, Oregon was one of 46 states involved with the Master Settlement Agreement with major tobacco companies. The settlement grew out of lawsuits by individual states against the tobacco industry to recoup the costs of caring for poor and uninsured people with illnesses caused by smoking. Under the agreement, tobacco companies modified some marketing practices and reimbursed each state based on a complex formula. Under the formula, Oregon will have received nearly \$400 million by the end of 2004. None of these funds have been used for tobacco cessation or prevention.

In Oregon, Master Settlement funds are folded into the state's general fund and allocated through the budget process. In the face of budget deficits, Oregon, like most other states, has used settlement dollars to help balance the budget.

Shouldn't we focus our efforts on preventing children from taking up smoking?

Prevention is a key piece of an effective tobacco control program. Although it is outside the purview of the Make It Your Business campaign, others are engaged in youth prevention efforts.

Taxes on tobacco, a leading deterrent to youth smoking, are \$1.18 per pack in Oregon, one of the 10 highest tobacco taxes in the nation. Unfortunately, funding for Oregon's Tobacco Prevention and Education Program was slashed by 70 percent for the 2003-2005 biennium. This reduced youth prevention efforts. Programs which have been in place since 1997 helped prompt a 47 percent decline in smoking among eighth graders and a 29 percent decline among eleventh graders. If you are concerned about youth prevention, you can use the legislative process to promote prevention programs.

Meanwhile, by helping the adult smokers in your company quit, you indirectly deter youth smoking. Children of smokers are nearly twice as likely to smoke as children of nonsmokers.

Where can I get more information about business and insurance company efforts to help smokers quit?

Call TOFCO at 1-888-846-5437 or in the Portland area at 503-238-7706 or visit our website at www.tobaccofreeoregon.org

Resource B: Tobacco Cessation Covered by Oregon Insurers

Insurer	Counseling	Medications	Comments
OREGON HMOs Health Net Health Plans Kaiser Foundation Health Plan PacifiCare Providence Health Plans Regence HMO Oregon ¹	Yes Yes Yes Yes No	No Yes Yes Yes No	Phone counseling: no copay. Group counseling: \$100 (\$40 refunded on completion.) Phone counseling: \$60. Medications, minus copays, refundable if in counseling program. Phone counseling: \$20 copay. Medications: \$20 copay for 30-day supply, up to 90 days. Phone counseling or group counseling: \$15 copay, with medications included. Offer as a rider.
OREGON INDEMNITY PLANS Lifewise ODS Health Plan One Health Plan PacifiSource Regence BCBSO ¹	Large groups No No No No	No No No No No	Will pay up to \$250 per year for counseling, subject to copay. Negotiated benefit. Offer as a rider.
OUT-OF-STATE INDEMNITY PLANS Aetna Mega Life & Health United of Omaha Insurance	No No No	No No No	Self-help materials linked to program. \$5 coupon for over-the-counter medications (gum or patch). One-time lifetime benefit of \$500, subject to copay.

Sources: Oregon Tobacco Quit Line and calls by the Tobacco-Free Coalition of Oregon to each insurer.

1. Members with heart, asthma, and diabetic conditions—who have prescription drug benefits—may receive medications and phone counseling with the negotiated co-insurance.

Resource C: Calculate Your Company's Tobacco Liability²⁷

This is a partial list of diagnoses caused or exacerbated by tobacco use. Health plan reports may contain this information, or special reports can be generated by the health plans or by internal healthcare data analysis systems. Benefits and human resource managers can use these data to help determine what you spend on tobacco use. It can also help measure the effectiveness of new programs or services you add.

How to calculate the costs of smoking-related diagnoses

	ICD-9 Diagnosis Code	Number of Claims	Estimated % Tobacco- Related	Cost Per Diagnosis	Cost to Your Company
Asthma	493.00				
Carcinoma, in situ, bronchus and lung	231.2				
Chest pain	786.50				
Chronic airway obstruction	496.00				
Chronic obstructive pulmonary disease	491.2				
Cough	786.2				
Diabetes mellitus	250.0				
Dysplasia, lung	748.5				
Dyspnea	786.0				
Emphysema, obstructive	492.8				
Hypercholesterolemia	272.0				
Infection, upper airway	465.9				
Metaplasia, tracheobronchial tree	519.1				
Reduced vital capacity	794.2				
Acute myocardial infarction	410.0				
Coronary atherosclerosis	414.0				

Resource D: Cover It Checklist

Steps to a tobacco-free workforce	Yes, done	No	Plan for next year	In 3-year plan	Planning in the future	Comments
<p>SMOKEFREE WORKPLACE</p> <ul style="list-style-type: none"> • We have a smokefree workplace. • We have a written policy about workplace tobacco use. • We have procedures to enforce our policy. 						
<p>COST/BENEFIT ANALYSIS</p> <ul style="list-style-type: none"> • We have a good idea how much tobacco use costs our business. • We have a plan to help tobacco users quit. • We know the cost to us of helping tobacco users quit. 						
<p>ASSISTANCE TO QUIT WE PROVIDE COUNSELING:</p> <ul style="list-style-type: none"> • Individual, group, or telephone counseling program through on-site program. • Employee cost is less than or equal to health insurance copayment. • Employee cost is greater than health insurance copayment. 						
<ul style="list-style-type: none"> • Individual, group, or telephone counseling program through health insurance. • Employee cost is less than or equal to health insurance copayment. • Employee cost is greater than health insurance copayment. 						
<ul style="list-style-type: none"> • At least one course of tobacco cessation counseling per year. <p>WE PROVIDE MEDICATIONS:</p> <ul style="list-style-type: none"> • Access to cessation medications. • Employee cost is less than or equal to health insurance copayment. • Employee cost is greater than health insurance copayment. 						
<ul style="list-style-type: none"> • Cessation medications through health insurance. • Employee cost is less than or equal to health insurance copayment. • Employee cost is greater than health insurance copayment. 						
<ul style="list-style-type: none"> • At least one course of tobacco cessation medication per year. 						

Overall, how would you describe your company's commitment to a tobacco-free workforce?

- Very strong commitment
 Pretty strong commitment
 Average commitment
 Minimal commitment
 No commitment

Resource E: Sample Employee Survey

One way to learn what employees need and want to know is to administer an anonymous survey. For those who have Internet access, a web-based survey is easiest because it compiles the data. (Check with your information technology staff, or consider a web-based survey service such as www.surveymonkey.com.)

Sample questions

Are you currently using tobacco?

Yes No

If yes, do you want to quit?

Yes No

When?

Next month In the next 2-6 months In 6-12 months Sometime later

Which of the following things would you consider using to help you quit? (Circle as many as you want)

Doctor visit Zyban/Wellbutrin Nicotine patch or gum Stop-smoking class
Confidential, 24-hour telephone counseling Support group Other _____

What health plan do you currently use?

Does your plan provide any help in quitting smoking?

Yes No I don't know

If you said yes, what help do you think your plan provides?

Zyban Nicotine patch or gum Stop-smoking class Doctor visits
24-hour telephone counseling Support group
Other _____

Where would you prefer to get information about tobacco-cessation benefits?

- From posters at work (where _____?)
- On the company intranet
- From the human resources department
- At company or group meetings
- Mailed to my home
- Other: _____

What information would be helpful for you?

What, if anything, could our company do to help you quit?

Resource F: Sample Focus Group Guide Tobacco Users

You can use focus groups to help develop and promote your company's tobacco cessation programs. Use this discussion guide to find out what smokers know about available programs, what help they would use, and the best way to communicate with them about services. A focus group is typically led by an outside facilitator who conducts an anonymous, non-threatening discussion with 8 to 10 employees. The session is usually taped and few, if any, observers are present. Participants may be paid an honorarium to participate.

How old were you when you started smoking?

What do you like about smoking?

What don't you like about smoking?

If I could wave a magic wand and you could quit smoking tomorrow, would you?

Those who said yes – what's the #1 reason why you would quit smoking?

Any other reasons why you want to quit?

Have you tried to quit before? How many times? How recently? What was that like? Did you get any help? (Probe: doctor, medications, counseling, encouragement from co-workers)

Are you thinking of trying to quit?

If yes, probe: Later this year? Within the next 6 months? Within the next 30 days?

How do you plan to quit? Will you get help? What kind of help? Will you go to a doctor? Use medications? Professional support or counseling? (Telephone or in person?)

Some of you said you would quit tomorrow, if I had that magic wand. But unfortunately, I don't. So tell me – what's the single greatest barrier to your quitting?

What would make it easier?

Now, let's switch gears a bit. Tell me, how does smoking affect your work life? (Probe: breaks, attention to work, relationships with co-workers)

What's hardest about being a smoker here at work? When is it most difficult?

What, if anything, could the company do to help you stop smoking?

Are you aware of anything the company offers to help employees quit? Do you know what medical benefits, if any, our health plans provide for smokers who want to quit?

How do you know that? (Probe: i.e. wellness fair, meetings about benefits, company newsletters)

I'm going to mention a few things that research has shown to be helpful to people who want to quit smoking. When I name these things, tell me if they would make you more likely, less likely, or have no effect on trying to quit:

1. Advice from a doctor or nurse
2. Low-cost, over-the-counter nicotine-replacement therapy such as patches, gum or inhalers
3. Low-cost, one-on-one counseling or professional support
 - a. Face-to-face
 - b. Over the telephone
 - c. In a group class away from work
 - d. In a group class at the workplace
4. How much would you be willing to pay for the medications? (aimed at finding a financial threshold)
5. How much would you be willing to pay for personal consultations?

Are there other things the company could do to make it easier for you to quit smoking? (Examples: Support from your immediate boss or your co-workers. Mints or gum. Stop smoking classes at work. Access to counseling or professional support. Medications.)

Any closing comments?

Thank you.

Resource G: Sample Focus Group Guide Those Who Do Not Use Tobacco

When investing in tobacco cessation for employees, it can be helpful to understand the feelings and perceptions of their nonsmoking coworkers. This sample guide helps identify attitudes about tobacco use, concerns about new programs or benefits and possibilities for the effective promotion of such a program. Consider hiring a facilitator to conduct an anonymous, non-threatening discussion with 8 to 10 employees. The session is usually taped and few, if any, observers are present. Participants often are paid an honorarium to participate.

How many of you have never used tobacco before?

What are the main reasons that you've never used tobacco?

Tell me how you feel about tobacco.

How do you feel about smokers?

How many of you have used tobacco before?

When did you smoke? For how long?

When did you quit?

What were the main reasons that you quit?

How did you quit?

All of you - How do you feel when others around you smoke?

Do any of you have close co-workers who smoke?

How do you feel about their tobacco use?

Probe: Indifferent? Angry? Sad?

Have you ever tried to get them to quit?

What did you do to encourage them or help them?

How did they respond?

How much help do you think people need to quit smoking?

What kind of help do you think they should get?

Probe: Medications? Counseling? Mentors?

Let's talk about the work environment. Is other people's tobacco use a problem for you at work?

What help do you think the company currently provides for people who want to quit?

What help do you think the company should provide for people who want to smoke?

Do you think the company health plans should provide help for people who want to quit smoking?

What if that cost slightly more in premiums — say \$3.50 a year? Would you support it then?

I can tell you that the company's health plan offers some help for smokers. Were you aware of that? If so, how do you know that?

(Probe: i.e. wellness fair, meetings about benefits, company newsletters)

Would you support company efforts to get more people to stop smoking?

What would you personally be willing to do?

Attend a seminar? Be a coach? Be part of a supportive environment? Talk to human resources?

Are there other things the company should do to make it easier for people to quit smoking?

(Examples: Support from your immediate boss, or your co-workers. Mints or gum. Stop smoking classes at work. Access to counseling, professional support or medication.)

Any closing comments?

Thank you.

Resource H: The Oregon Tobacco Quit Line

Research shows that telephone counseling is one of the most effective ways to help people quit smoking or chewing tobacco. Many states, including Oregon, operate quitlines that offer free telephone counseling and referrals to local services. Tobacco users who call a quitline are connected with a trained counselor, who assesses their readiness to quit, advises them on next steps in the quitting process and, when the person has insurance coverage, assists them through the next steps of quitting.

Under the current budget, the Oregon Tobacco Quit Line offers state residents one free call. The caller's insurance coverage is checked against an insurance database. Those without tobacco cessation coverage can receive materials about quitting and are referred to community-based services for help.

The Oregon Health Plan and three commercial plans in Oregon—Providence Health Plans, Kaiser Permanente and Pacificare—offer more comprehensive coverage that links to the Oregon Tobacco Quit Line. Callers from these insurers receive professional help and are assisted in devising a quit plan. The plan can include up to four follow-up calls from a counselor over the course of several months. It individually addresses how a person will overcome behavioral issues, receive support, and cope with the physical symptoms of nicotine withdrawal. Under some plans, the caller can receive over-the-counter medications through the mail. Everyone with coverage can call a counselor whenever they need additional support.

The Oregon Tobacco Quit Line is operated through a state contract with the Center for Health Promotion, which runs the Free & Clear program. This program, in operation for more than a decade, is a service of the Seattle-based Center for Health Promotion. Clinically proven by the National Cancer Institute, it has helped more than 60,000 people quit tobacco. Large businesses, as well as insurers and state quitlines, can contract with Free & Clear to help employees quit tobacco.

Business inquiries: Center for Health Promotion at 1-800-292-2336 or www.freeandclear.org

Tobacco user calls

Monday - Thursday, 9 a.m. – 8 p.m.

Friday: 9 a.m. – 5 p.m.

Saturday: 9 a.m. – 1 p.m.

English:

1-877-270-STOP

1-877-270-7867

Spanish:

1-877-2NO-FUME

1-877-266-3863

TTY: 877-777-6534

Resource I: Useful Web Sites

The following websites contain information employers can use, including reasons to quit, stop-smoking tips and advice on how nonsmokers can help.

<http://www.americanheart.org/>

The **American Heart Association** website provides consumers with education and information on fighting heart disease and stroke. This site has a risk assessment and links to additional information.

<http://www.cancer.org/>

The **American Cancer Society** website includes information about smoking, prevention and cessation programs.

<http://www.cdc.gov/tobacco/>

The **Centers for Disease Control and Prevention** website is filled with information on tobacco use and nicotine addiction, as well as tips on quitting smoking.

<http://www.lungusa.org/>

The **American Lung Association** conducts programs addressing smoking cessation, prevention and the protection of nonsmokers' health. Its website provides educational materials for the public and healthcare professionals. It also has a Daily Lung Health News Ticker linked to articles.

<http://www.nci.nih.gov/>

The **National Cancer Institute (NCI)** website provides information about the government's cancer research program. It details information on cancer, smoking risks and the benefits of quitting.

<http://www.dhs.state.or.us/publichealth/tobacco/>

The **Oregon Department of Human Services** Tobacco Prevention and Education Program maintains a website that includes Oregon data, information about state and federal laws and materials you can order.

http://www.providence.org/Oregon/Health_Resource_Centers/Smoking

Providence Health System provides information about tobacco cessation programs and services available to employees, members and the community at large.

<http://www.quit tobacco.org>

QuitTobacco.org, developed by **The Center for Health Promotion**, Inc. provides stop-smoking tips and other information from its Free & Clear smoking-cessation program.

<http://www.tobaccofreeoregon.org>

The **Tobacco-Free Coalition of Oregon** website includes information on the Make It Your Business Campaign and Oregon events concerning smoking cessation and prevention.

Resource J: Materials You Can Use

This toolkit includes materials you can use to promote tobacco cessation in your workplace:

- Two posters in the back pocket of this toolkit. These posters can stand alone, or you can customize them, using the stickers in the back pocket.
- Sample newsletter copy. We have provided two articles below which you can use in your company newsletter or adapt to a flyer.

(Publish in mid- to late-October so smokers can prepare to quit.)

It's a great day to quit tobacco!

The Great American Smokeout is drawing near – and if you've been thinking of quitting tobacco, why not join with others on **(date)**?

The smokeout, held every year on the third Thursday in November, is sponsored by the American Cancer Society to encourage smokers to quit for at least one day, in hopes they will quit forever.

Experts agree that choosing a quit date in advance (like the Great American Smokeout) is the first step toward becoming tobacco-free. By choosing a quit date, you can prepare yourself and those who care about you for this important step.

Even if you've tried to quit before, research shows that you can double or triple your chances of successfully quitting if you find the right mix of medicine and support. Oregonians ready to quit are eligible for one free call to the Oregon Tobacco Quit Line at 1-877-270-7867. In addition, **(Name of your company)** provides these services: **(List them here, or refer employees to someone who can give them this information.)**

If you would like to make this your day to quit, seek the help you need from friends, co-workers, family and professionals. In addition to the services we provide, there is help on the Internet. Check out the American Cancer Society's website at www.cancer.org.

Let our Human Resources folks know if there's any way we can help. Good luck!

(Publish anytime)

Thinking About Quitting Smoking? 10 Great Reasons To Quit Today!

Regardless of how much or how long you have smoked, you will experience the benefits of quitting as soon as you finish your last cigarette. When you quit smoking, you will experience physical and emotional benefits that begin within an hour of quitting that will continue for years. If you have been thinking about quitting smoking, here are 10 great reasons to make the change today:

1. Save money. A pack-a-day smoker will save more than \$1,400 each year!
2. Smell better. Your clothes, hair, car and house will no longer have that stale cigarette smell.
3. Look better. Nonsmokers have fewer wrinkles and healthier skin than smokers.
4. Enhance your sense of taste and smell. Within just 48 hours, you develop a keener sense of smell and taste.
5. Live to see your grandchildren. People who quit smoking before age 50 have half the risk of dying in the next 15 years, compared with continuing smokers.
6. Improve your health. When you quit smoking, you decrease the risk of heart attack, stroke, bronchitis, emphysema, lung cancer and all other cancers.
7. Improve your child's health. Children who live in smoke-free homes are less likely to have asthma, coughs and colds.
8. Have a healthy baby. Women who stop smoking before pregnancy decrease the risk of having a low birth-weight baby and increase the chances of a healthy pregnancy and a healthy newborn.
9. Breathe easier. As soon as two weeks after quitting, you increase your lung function by as much as 30 percent, making it easier to breathe.
10. Pump up your energy level. Within a month of quitting, your stamina will increase.

Quitting smoking is not easy, but there are resources available that can make it easier. **(Insert company name)** is committed to helping you quit. For more information on the benefits that are offered to help you quit for good, call Human Resources at **(insert phone number)**.

Resource K: Model Smoke-free Policy ²⁰

Policy

Due to the acknowledged hazards arising from exposure to environmental-tobacco smoke, it shall be the policy of _____ to provide a smoke-free environment for all employees and visitors. This policy covers the smoking of any tobacco product and the use of smokeless or "chew" tobacco and applies to both employees and visitors.

Definition

1. There will be no smoking or chewing of tobacco products within the facilities or on the property of _____ at any time.

For companies that choose to provide outside smoking areas:

The decision to provide or not provide designated smoking areas outside the building will be at the discretion of management. If the smoking area is not properly maintained (for example, if cigarette butts or matches are found on the ground), it can be eliminated at the discretion of management.

Any areas that are designated as smoking areas will be located at least 20 feet from the main entrance.

2. There will no smoking or chewing of tobacco in company vehicles at any time.
3. There will be no smoking or chewing of tobacco at any off-property company-sponsored meetings or events.

Breaks

Supervisors will discuss the issue of smoking breaks with their staff. Together they will develop effective solutions that do not interfere with the productivity of employees.

Procedure

1. Employees will be informed of this policy through signs posted in company facilities and vehicles, the policy manual, and orientation and training provided by their supervisors.
2. Visitors will be informed of this policy through signs, and it will be explained by their host.
3. The company will assist employees who wish to quit smoking by facilitating access to recommended smoking-cessation programs and materials.
4. Any violations of this policy will be handled through the standard disciplinary procedure.

Resource L: Promote It Checklist

BENEFITS OR SERVICES WE PROVIDE		
BENEFIT	INSURANCE PROVIDER	COPAY/DEDUCTIBLE
Medications Type:		
Counseling Number of sessions:		
Other		
OUR PROMOTION STRATEGIES		
PROMOTION	WHO WILL DO IT	WHEN
Posters at work Locations:		
Company intranet		
Company newsletters		
Fliers/postcards		
Group meetings		
Other:		
OTHER SUPPORT WE'LL PROVIDE		
Barriers to quitting, identified by our employees:		
Changes we can make in the workplace: (ex: smoke-free property, stress reduction)		
Support we can provide at work: (ex: on-site classes; wellness promotion; mints, toothpicks or gum)		
Special events we can promote: (ex: Great American Smokeout, health fair)		

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Tobacco-Free Coalition of Oregon

The Tobacco-Free Coalition of Oregon (TOFCO) is a statewide coalition of more than 400 businesses, organizations and individuals who advocate for programs and policies that will decrease the toll of tobacco-use in Oregon.

Our history:

TOFCO was founded in 1995, combining efforts of non-profit groups, businesses, community groups, county health departments and concerned Oregonians. TOFCO is working to achieve three goals:

- Helping people quit tobacco;
- Stopping young people before they start;
- Protecting nonsmokers from second-hand smoke.

Current efforts:

TOFCO is working on three initiatives:

- Promoting health benefits and services to help people quit tobacco;
- Expanding Oregon's Smokefree Workplace Law to cover all workers;
- Ensuring adequate funding for the state's successful Tobacco Prevention and Education Program.

How we work:

TOFCO works in partnership with other organizations, volunteers and a hired lobbyist to promote policies that decrease the toll of tobacco in Oregon. Our partnerships span the state and include businesses, unions, health care professionals, government agencies, insurance companies, non-profits and community groups.

Milestones:

Several landmark initiatives have influenced TOFCO's development.

In 1996, TOFCO supported efforts by the American Heart Association, American Cancer Society and American Lung Association to pass a tobacco-tax increase of 30 cents per pack. This effort funded the Tobacco Prevention and Education Program (TPEP). Since TPEP's inception, the state's top health officials report that Oregon's cigarette consumption has declined by almost 30 percent.

Under Oregon's TPEP program, community-based coalitions were formed in all 36 of Oregon's counties. With TOFCO's support and assistance, 15 cities and three counties enacted local workplace smoking ordinances, 10 communities devised policies restricting youth access to tobacco products and two communities passed laws restricting smoking in public parks and at public events.

In 1998, TOFCO collaborated with the Office of Medical Assistance programs, the Department of Human Services, Health Services, and many of Oregon's health systems to be the first state in the nation to establish comprehensive, evidence-based tobacco-cessation benefits for all Oregon Health Plan recipients.

In 2002, TOFCO helped coordinate efforts to pass Measure 20 that successfully increased Oregon's tobacco tax by 60 cents per pack. This increase is earmarked to fund Oregon's health care programs, and encourage adults and youth to stop smoking.

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Tobacco-Free Coalition of Oregon



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