

Providing a Smoking Cessation Benefit

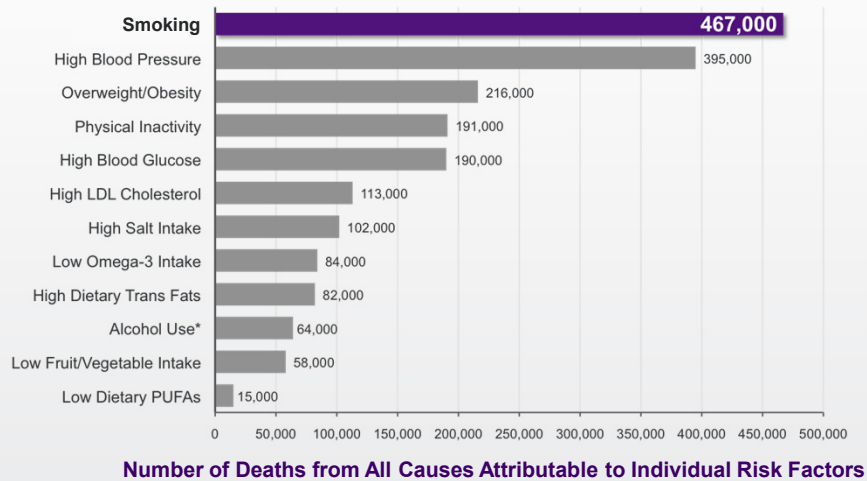
Leading Practices

Greater Philadelphia Business Coalition on Health
September 4th, 2014
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Medical Outcomes Specialist



1

Smoking Is Still the Single Largest Preventable Cause of Premature Death in the United States



* Excludes uncertainty in intentional and unintentional injury outcomes because the attributable deaths used data sources that did not report sampling uncertainty. Danaei G et al. PLoS Med. 2009;6(4):e1000058.



2

Smoking Cessation Is One of the Most Cost-Effective Benefits to Cover

Smoking cessation (SC) has the potential to reduce health care resource utilization and lower costs for quitters

- SC is tied for first place with child immunizations and aspirin use in high-risk adults as the most cost-effective benefit
- SC is more cost-effective than many commonly covered preventive treatments, including those for high cholesterol and high blood pressure
- SC benefits are either cost-saving or cost-neutral over 3–5 years
- Paying for treatment is the single most cost-effective health insurance benefit for adults

ACA/MHPAEA

CDC. http://www.cdc.gov/tobacco/quit_smoking/cessation/coverage/index.htm. Accessed May 18, 2011.
Partnership for Prevention. <http://www.prevent.org/Topics/Tobacco-Control.aspx>. Accessed May 18, 2011.



3

Health Experts Recognize That Counseling and Pharmacotherapy Together Are More Effective Than Either Alone

- Public Health Service (PHS) Guideline for treatment and interventions
 - Clinicians should encourage all individuals making a quit attempt to take medication and engage in counseling for smoking cessation (SC) treatment
 - There are 7 effective first-line medication options for SC
 - Individual, group, and telephone counseling are effective, and their effectiveness increases with treatment intensity
- According to the US Department of Health and Human Services Public Health Service and the American Lung Association, SC coverage should include
 - Coverage of SC prescription and over-the-counter medications
 - Coverage for at least 2 SC attempts a year
 - Elimination or minimization of copay or deductible costs for medication and counseling
 - Adopting a long-term approach to SC that supports multiple quit attempts

Fiore et al. USDHHS. PHS. 2008. <http://www.surgeongeneral.gov/tobacco/default.htm>. Accessed May 4, 2011.
ALA. <http://www.lungusa.org/stop-smoking/tobacco-control-advocacy/reports-resources/helping-smokers-quit-state.html>. Accessed May 4, 2011.



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Leading Health Agencies and Organizations Have Recognized the Value of Smoking Cessation Coverage

- Several health agencies and organizations state that covering smoking cessation screening is beneficial
 - Centers for Disease Control and Prevention (CDC)
 - Surgeon General, US Department of Health and Human Services Public Health Service
 - US Preventive Services Task Force (USPSTF)
 - National Business Coalition on Health (NBCH)
 - Partnership for Prevention
 - World Health Organization (WHO)



CDC. http://www.cdc.gov/tobacco/quit_smoking/cessation/practical_guide/index.htm. Accessed August 21, 2011.
 Fiore MC et al. <http://www.surgeongeneral.gov/tobacco/default.htm>. Accessed June 6, 2011.
 United States Preventive Services Task Force. <http://www.uspreventiveservicestaskforce.org/3rduspstf/tobacco/tobacco.htm>. Accessed August 10, 2011.
 National Business Coalition on Health. <http://www.nbch.org/Other-Resources>. Accessed June 5, 2011.
 Partnership for Prevention. <http://www.prevent.org/Publications-and-resources.aspx>. Accessed May 10, 2011.
 World Health Organization (WHO). Tobacco Free Initiative Executive Summary 2011. http://www.who.int/tobacco/global_report/2011/en/index.html. Accessed August 21, 2011.

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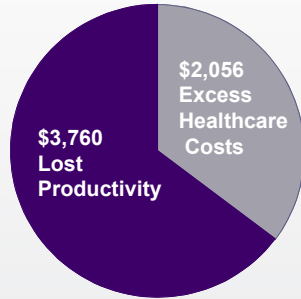
Smoking Impacts Employers

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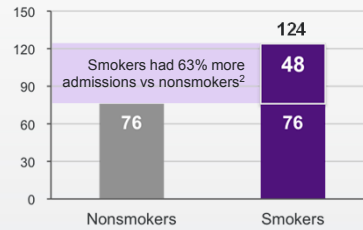


Employer's Perspective on the Financial Burden of Smoking

Additional Costs to Self-Insured Employer Averages \$5,816 per Smoker¹



Additional Hospitalizations for Smokers vs Nonsmokers Per 1000 Employees



¹ Based on estimated average costs per smoking employee incurred by a self-insured private employer due to excess absenteeism, presenteeism, smoking breaks, excess healthcare expenses and an adjustment for reduced pension benefits.

² 1988 data from a large group's indemnity plan analyzed by Penner and Penner in that year, and reported by Javitz in 2006. In the same study, smokers had 110% more hospital days than nonsmokers per 1000 employees.

Berman M, Crane R, Seiber E, Murur M. Estimating the cost of a smoking employee. *Tobacco Control*. Published online first: June 2, 2013 doi:10.1136/tobaccocontrol-2012-050888. Accessed April 4, 2014.

Javitz HS et al. *Clin Occup Environ Med*. 2006;5(1):9-29.



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Smoking Can Impact Employee Productivity



- Smokers are **absent 1.5 times more often** than nonsmokers
- Smokers average **6.7 health-related absences per year** compared with nonsmokers (4.4 days)

Absenteeism*

Presenteeism†

- Smokers average **more hours lost, at a rate of 76.5 per year**, compared with nonsmokers (42.8 hours)



- Work time spent on smoking-related activities results in 3.25 weeks per year of nonproductive time

*When an employee is not physically present at a job location.

†When an employee is physically present at a job location, but is not productive due to a health condition.
Bunn WB III et al. *J Occup Environ Med*. 2006;48(10):1099-1108.

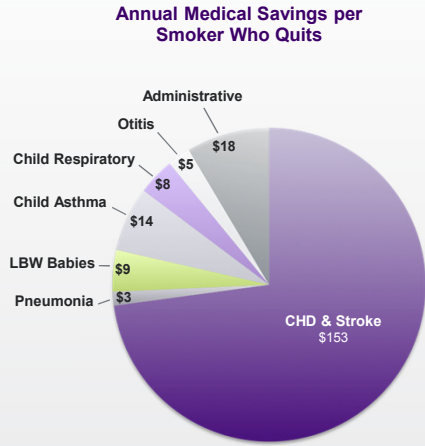


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Employers Can Benefit When Employees Quit Smoking

- Smoking cessation has a short-term impact on employer-sponsored health and life insurance benefits

- Immediate decrease in medical and life insurance costs of at least \$210 for each employee or dependent who quits smoking*
 - Savings may be underestimated, as they do not include other smoking-related conditions or disability, lost work time, or replacement costs



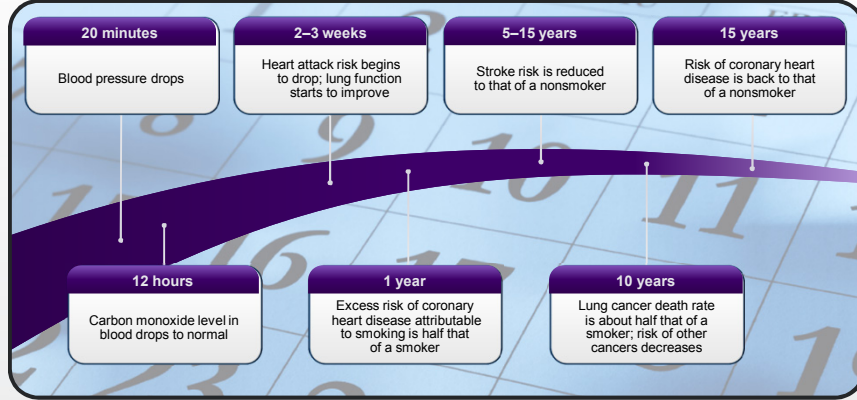
*\$233 in 2011 dollars. Bureau of Labor Statistics consumer price index inflation calculator. http://www.bls.gov/data/inflation_calculator.htm. Accessed May 5, 2011.
LBW=low birth weight; CHD=coronary heart disease.
Fitch K et al. *Milliman Report*. December 2006.



Health and Economic Benefits of Quitting Smoking



Potential Health Benefits of Smoking Cessation

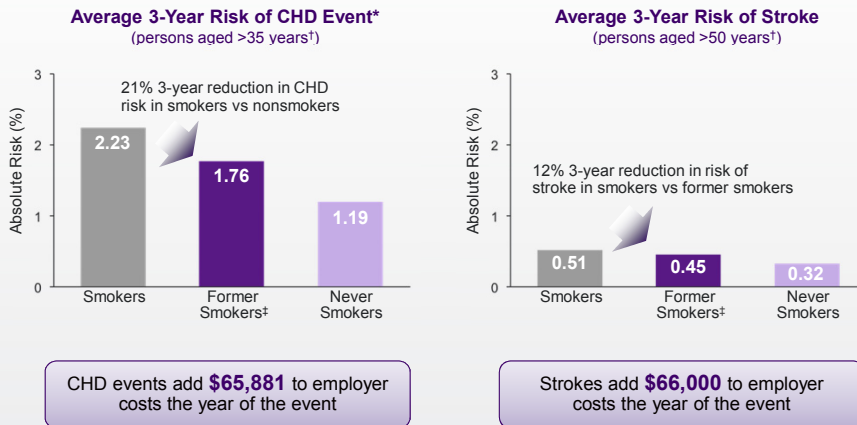


American Lung Association. <http://www.lungusa.org/stop-smoking/how-to-quit/why-quit/benefits-of-quitting>. Accessed July 27, 2011.
 CDC. http://www.cdc.gov/tobacco/data_statistics/egr/2004/pdfs/WhatItMeansToYou.pdf. Accessed May 4, 2011.



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Quitting Smoking Reduces 3-Year Risk of Major Health Events



*Includes heart attack and coronary revascularization surgery.
 †Age categories based on Framingham risk estimates.
 ‡Results in former smokers are for the 3 years after quitting.
 CHD=coronary heart disease.
 Adapted from Fitch K et al. Milliman, Inc. 2006.



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Even Modest Reductions in Smoking Rates May Have Substantial Health and Economic Benefits

Annual 1% Drop in Smoking Prevalence for 7 Years*

A 1% annual reduction in smoking prevalence over 7 years could reduce US health care costs by \$3.2 billion, according to a model based on California's experience.†

	Year 1	Year 4	Year 7
Cases avoided annually, not including deaths before hospital (± standard deviation)			
Acute myocardial infarction (AMI)	924 (±679)	8736 (±2303)	18,356 (±3986)
Stroke	538 (±508)	4734 (±1497)	9729 (±2403)
Cost savings (in millions of dollars)			
Annual	44 (±26)	435 (±90)	933 (±155)
Cumulative	44 (±26)	909 (±209)	3205 (±587)†

Savings are represented in 2011 dollars.

*Per simulation model.

†The equivalent costs savings in 2011 dollars is \$4.7 billion. Bureau of Labor Statistics CPI Inflation Calculator. http://www.bls.gov/data/inflation_calculator.htm. Base year of analysis was 1995.

Lightwood JM et al. *Circulation*. 1997;96(4):1089-1096.

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A 2010 Study Showed That Many Americans Smoked, But More Than Two-Thirds Wanted to Quit

- Smoking is the leading preventable cause of death in the US
- Despite public awareness of the health dangers of smoking and years of antismoking efforts, 1 in 5 Americans still smoke
- Most want to quit, but few succeed on their own

>70%
of smokers
want to quit



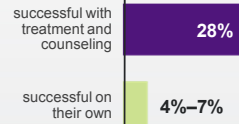
~44%–47%
of smokers try to
quit each year



6–9
lifetime quit attempts
for the average smoker



of smokers attempting to quit...



Foulds J et al. *Expert Opin Emerg Drugs*. 2004;9(1):39-53.
 CDC. *MMWR Morb Mortal Wkly Rep*. 2010;59(35):1135-1140.
 Fiore MC et al. USDHHS 2008. <http://www.surgeongeneral.gov/tobacco/default.htm>. Accessed June 6, 2011.
 American Lung Association. State of Tobacco Control 2010. <http://www.stateoftobaccocontrol.org>.

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Questions and Discussion

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May 2014

