Healthcare and Smoking: Cutting Excess Medical Cost With Increased Cessation Materials

Healthcare Brief from the University of Minnesota

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“Effects of Motivational Interviewing Counseling on Utilization of a Quitline among Smokers in Primary Care”
Our Air, Our Money:

Tobacco remains the leading cause of preventable diseases and deaths in the United States. In Minnesota, up to one in six adults smoke cigarettes and approximately 5,100 deaths each year are attributable to smoking. This public health concern alone is enough to raise alarm, but when it is associated with extraordinary excess medical costs, further action must be taken.

**In 2007, the health care costs associated with tobacco related-diseases in Minnesota were estimated to be an astonishing $2.9 billion.**

While research has shown that smoking cessation interventions are one of the most cost-effective methods of disease prevention for adults, they remain under-utilized by smokers. Quitlines in Minnesota are free and accessible phone-based counseling, however less than 5% of smokers in Minnesota use these services. In a recent University of Minnesota study, researchers found that using phone-based Motivational Interviewing (MI), a non-judgmental approach to counseling, and mailing print materials increased the likelihood that smokers contacted quitlines.

By adopting the recommendation of Motivational Interviewing phone calls and disseminating print materials to current smokers, the state has the potential to save billions of dollars that would normally go toward unnecessary tobacco-related medical costs. In order to have a more substantial population impact for reducing tobacco use, and thus decreased medical expenditures, utilization of tobacco quitlines must increase.
Areas of Action:

Based off the findings from the current study, researchers from the University of Minnesota recommend implementing the following:

- Initiate mailing smoking cessation materials to all smokers in the clinic database

- Initiate Motivational Interview phone calls with smokers and create incentives for smokers who quit and do not relapse

- Utilize an electronic database as a feasible method of identifying smokers in primary care clinics

“Something as basic as mailing smoking cessation materials to smokers and providing motivational encouragement can have a large impact on the use of quitlines by smokers.”

-Kola Okuyemi, M.D., M.P.H.
Principal Investigator
Director of Program in Health Disparities Research
University of Minnesota
Approaches:

The primary study outcome was to determine the proportion of smokers who enrolled in the quitline at the end of the 26-week study. Researchers identified 3,080 smokers through primary care practices from an electronic database, of this, 235 participated.

Participants were randomly divided into two equal groups, the Intervention group received Motivational Interviews counseling (MI) and the Control group did not.

Highlighted Results:

• At week 4, more participants in the MI group (15.3%) enrolled in the quitline compared to the participants in the Control group (8.6%)

• At week 26, 28% of participants in the MI group enrolled in the quitline compared 27% from the Control group

• Twenty-four percent of all study participants reported abstinence from tobacco use at the 26-week follow up

In the short term, MI was more effective to get smokers to enroll than mailing the Clearing the Air brochure. However, in the long term, enrollment rates were similar.

With this information, researchers conclude that having both print materials and MI calls will influence smokers to contact quitlines.

Implications on Minnesota’s Economy:

In 2007 in Minnesota alone, smoking was responsible for $2.9 billion in excess medical expenditures. However, by mailing or personally handing out quitline print materials or providing motivational counseling, smokers could be encouraged to contact the quitlines.

States, health care providers, and insurance companies can make a significant public health and financial difference by encouraging smokers to contact the quitlines.

For more information, please visit: www.healthdisparities.umn.edu