

Frequently Asked Questions: Resource A

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

Make It Your Business focuses on the value of tobacco use policies and cessation assistance. Since Make It Your Business was founded in Oregon in 2003, campaigns have sprung up in at least nine states. Though they vary by community, all persuade businesses and insurers to routinely protect workers from the hazards of tobacco and to invest in and promote tobacco-cessation benefits or services, 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 resources executives notice fewer conflicts between smokers and nonsmokers in a tobacco-free environment.

Work locally. 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 encourages employers and insurers to universally offer tobacco-cessation treatment—a move that speeds up the return on investment for everyone and creates a clinical pathway so health care providers can more easily help smokers quit.

In my state, small businesses pay community rates for health insurance. No matter what we do, premiums rise. Why would I add anything when I reap no savings?

You reap productivity savings right away. Furthermore, you’ll be part of a community-wide effort that will result in longer-term savings. This should mean 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?

There are no guarantees. Most public insurance programs (Medicare, Medicaid, Veteran’s Administration) provide some tobacco-cessation treatments, but such coverage in the private market is spotty.

Find out whether your company covers effective tobacco-cessation services. 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 nonsmokers 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. Tobacco-cessation counseling has been shown to be one of the most cost-effective clinical preventive services available—and highly underused. An effective benefit will entice use of this service to help smokers quit, rather than discourage them from trying.

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

About three-quarters of all 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 new insights and strategies that will make subsequent attempts easier. Virtually no one would suggest 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.

Don't taxes and funds from the Tobacco Master Settlement Agreement cover this kind of thing?

Every state taxes cigarette sales. Rates range from 7 cents a pack in South Carolina to \$2.75 a pack in New York (August 2008). In addition, tobacco companies are required to compensate states for some of the costs of treating people with smoking-related illnesses, under the Tobacco Master Settlement Agreement developed in 1998. In fiscal year 2008, states were projected to collect a record \$24.9 billion from the tobacco settlement and tobacco taxes, according to the Campaign for Tobacco-Free Kids.

Just 6.4 percent of this total could fund tobacco prevention and cessation programs in every state at minimum levels recommended by the Centers for Disease Control & Prevention. However, states allocated only 2.9 percent of their tobacco revenue for tobacco prevention and cessation.

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

Prevention is a key piece of an effective tobacco-control program and can complement the work you are doing to help adult smokers quit.

If you are concerned about youth tobacco-use prevention, join legislative efforts to increase tobacco taxes and fund tobacco control and prevention programs. Taxes on tobacco are a leading deterrent to youth smoking. There also may be opportunities to join partnerships with other businesses or with local schools.

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

Calculate your company's tobacco liability: Resource B

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
Acute myocardial infraction	410.0				
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				
Coronary atherosclerosis	414.0				
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				

Source: *Professional Assisted Cessation Therapy. Employers' Smoking Cessation Guide: Practical Approaches to a Costly Workplace Problem.* 2002:20-21. www.endsmoking.org

Cover It! Checklist: Resource C

Steps to a tobacco-free workforce	Yes, done	No	Plan for next year	In 3-year plan	Planning in the future	Comments
SMOKEFREE WORKPLACE						
• We have a smokefree workplace.						
• We have a written policy about workplace tobacco use.						
• We have procedures to enforce our policy.						
COST/BENEFIT ANALYSIS						
• 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.						
ASSISTANCE TO QUIT						
WE PROVIDE COUNSELING:						
• 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.						
• 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.						
• At least one course of tobacco-cessation counseling per year.						
WE PROVIDE MEDICATIONS:						
• Access to over-the-counter and prescription cessation medications.						
• Employee cost is less than or equal to health insurance copayment.						
• Employee cost is greater than health insurance copayment.						
• Cessation medications through health insurance.						
• Employee cost is less than or equal to health insurance copayment.						
• Employee cost is greater than health insurance copayment.						
• 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

Sample Employee Survey: Resource D

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

1. What is your opinion of the tobacco-use policy at work?
 Not strict enough Reasonable Too strict
2. Are you currently using tobacco?
 Yes No
3. If yes, do you want to quit?
 Yes No
4. When?
 Next month In the next 2-6 months In 6-12 months Sometime later
5. Which of the following things would you consider using to help you quit? (Check as many as you want)
 Doctor visit Zyban/Wellbutrin Nicotine patch or gum Stop-smoking class
 Confidential, 24-hr. telephone counseling Support group Varenicline /Chantix
 Other_____
6. Does your plan provide any help in quitting smoking?
 Yes No I don't know
7. If you said yes, what help do you think your plan provides?
 Zyban Nicotine patch or gum Stop-smoking class Doctor visits
 24-hr. telephone counseling Support group Varenicline /Chantix
 Other_____
8. 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:_____
9. What information would be helpful for you?
10. What, if anything, could our company do to help you quit?

Sample Focus Group Guide: Resource E 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?

What is your opinion of the tobacco-use policy at work? What would make it better?

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, lozenges, or inhalers
3. Prescription drugs, including Zyban or Chantix
4. 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
5. How much would you be willing to pay for the medications? (aimed at finding a financial threshold)
6. 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?

Sample Focus Group Guide: Resource F 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. What is your opinion of the tobacco-use policy at work?
What would make it better?

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 \$5.00 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?

Useful Web Sites: Resource G

The following websites contain information employers can use or share with employees.

For the employer

America's Health Insurance Plans provides on-line calculator that can help you determine your return on investment for tobacco-cessation benefits. The calculator offers a conservative projection, based only on the impact of medical costs—not the impact of lost productivity. <http://www.businesscaseroi.org>

The **National Business Group on Health** hosts A Purchaser's Guide to Clinical Preventive Services: Moving Science into Coverage. In addition to providing strong rationale for covering tobacco-cessation treatment, it includes technical language to describe and bill for an effective benefit. <http://www.businessgrouphealth.org/benefitsttopics/topics/purchasers/fullguide.pdf>

Americans for Nonsmokers Rights maintains a database that can tell you about public smoking policies in your community. It also includes information about how to avoid second-hand smoke in your workplace, community and home. <http://www.no-smoke.org/>

The **Global Smokefree Partnership** addresses why businesses and communities need to ban tobacco and provides tools to help them. The Smokefree in a Box link includes sample policies and a detailed 12-month timeline for becoming tobacco-free. <http://www.globalSmokefreePartnership.com>

WorkSHIFTS, a program of Minnesota's Tobacco Law Center, has guides for unions and employers on tobacco use and smoke-free policies, including legal insights on tobacco policy as a bargaining issue. <http://workshifts.org/>

Free & Clear offers online and telephone coaching products designed to help employees quit tobacco and improve other key health indicators. <http://www.freeclear.com>

1-800-QUIT NOW Find out what kinds of tobacco quit line services are available to the public in your state, including hours of operation, languages spoken and whether someone is eligible for cessation medications. <http://1800quitnow.cancer.gov/> You can order cards to promote the quit line through the Smoking Cessation Leadership Center. <http://smokingcessationleadership.ucsf.edu/>

The **Pacific Business Group on Health** developed *Tobacco Cessation Benefit Coverage and Consumer Engagement Strategies: A California Perspective*. The publication includes specific information about tobacco cessation coverage by insurers in California and more general information about the value of such benefits. http://www.pbgh.org/documents/PBGH-CDC_TobaccoCessation_06-2008.pdf

Mayo Clinic Nicotine Dependence Center provides information on quitting tobacco and offers an inpatient tobacco treatment program. <http://www.mayoclinic.org/stop-smoking/programs.html>

For the employee who wants to quit tobacco

The **National Cancer Institute** offers tips for handling quitting challenges, including cravings, irritability, stress, depression, boredom and drinking. <http://www.nci.nih.gov/> The Institute also hosts a site focused on individuals quitting tobacco: <http://www.Smokefree.gov> You will find printed materials, information about available support through telephone and text-messages and a list of tobacco-related research that may need study subjects.

The **Centers for Disease Control and Prevention** website includes information on tobacco use, nicotine addiction and tips on quitting smoking. The CDC also has a booklet that makes the case for establishing tobacco-free policies at work, *Save Lives, Save Money: Make Your Business Smoke Free*. http://www.cdc.gov/tobacco/secondhand_smoke/00_pdfs/save_lives_save_money.pdf
<http://www.cdc.gov/tobacco/>

The **Agency for Healthcare Research and Quality** has materials in English and Spanish to help smokers quit, including a five-day quit countdown that can be downloaded onto a palmtop computer. <http://www.ahrq.gov>

Smoking causes at least 15 kinds of cancer. The **American Cancer Society** offers information about smoking, prevention and the Fresh Start cessation program for pregnant women. <http://www.cancer.org/>

Smoking causes 87 percent of lung cancer cases. The **American Lung Association** has materials for the public and healthcare professionals and the on-line Freedom from Smoking cessation curriculum. <http://www.lungusa.org/>

Smokers are two-to-three times more likely to die from heart disease than nonsmokers. The **American Heart Association** urges consumers to fight heart disease and stroke through lifestyle changes, including quitting tobacco. <http://www.americanheart.org/>

Nicotine Anonymous is a 12-step support program designed to help people live without using tobacco. Meetings are available by telephone, over the internet, and in many communities. <http://www.nicotine-anonymous.org>

<http://www.QuitNet.com> provides on-line support for quitting tobacco, including research information, testimonials, on-line communities, and cessation resources in your locale.

<http://www.BecomeAnEX.org> is an on-line program of the **American Legacy Foundation** that focuses on relearning life without cigarettes. Users can create a quit plan, access information, and share stories and strategies through virtual groups.

Materials You Can Use: Resource I

Here are two articles 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. If you are ready to quit, call the Tobacco Quit Line at 1-800-QUITNOW. In addition, (Name of your company) provides these services: (List them here, or ref 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!

When you quit smoking, you will experience physical and emotional benefits that begin within an hour, and 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). Or call 1-800-QUITNOW.

Promote It! Checklist: Resource J

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		
Flyers and postcards		
Group meetings		
Other:		
OTHER SUPPORT WE'LL PROVIDE		
Barriers to quitting, identified by our employees:		
Changes we can make in the workplace: (e.g.: smoke-free property, stress reduction)		
Support we can provide at work: (e.g.: on-site classes; wellness promotion; mints, toothpicks or gum)		
Special events we can promote: (e.g.: Great American Smokeout, health fair)		

Sample Tobacco-Free Workplace Policy: Resource K

Name of Company

1. PURPOSE

1.1 _____ desires to promote the health and wellness of employees by incorporating a total “tobacco-free” workplace. Subsidiaries can individually manage their transition to a “tobacco-free” workplace based on their current smoke-free status, but must be totally tobacco-free by no later than _____.

1.2 To be in compliance with this policy, companies must communicate the tobacco-free workplace policy to employees and develop site-specific implementation plans in conjunction with site management, Human Resources, and Health & Safety no later than _____.

1.3 Each affiliate is expected to establish a company policy of its own which incorporates each of the elements described in this corporate policy. Where local laws restrict certain concepts in the policy, it is expected that the local company policy will be modified to be permissible under the law.

2. PRODUCTS COVERED

2.1 The personal health hazards related to all tobacco products, which include but are not limited to, smoking (e.g., cigarettes, pipes, cigars, hookah, etc.) and/or using smokeless tobacco (e.g., snuff, chew-gutka, jarda, betel quid, etc.), have been well-documented. The health hazards affect the smoker and the nonsmoker who is exposed to secondhand smoke. It is the intent of _____ to provide all employees with a work environment conducive to good health.

3. APPLICATION OF POLICY

3.1 This policy is applicable to all employees, contractors, and visitors while on the property at any of our locations worldwide. As necessary, this policy will be modified to comply with local laws regulating designated smoking areas.

3.2 All employees, contractors, and visitors are prohibited from using tobacco at _____ company workplaces. The workplace is defined as inside all company-owned or leased facilities, as well as outside on the grounds and parking lots, and personal vehicles on company property. This policy also applies to company-sponsored meetings and events on or off company premises. Prohibited uses of tobacco include but are not limited to smoking (e.g., cigarettes, pipes, cigars, hookah, etc.) and/or using smokeless tobacco (e.g., snuff, chew-gutka, jarda, betel quid, etc.).

3.3 Tobacco-cessation and awareness programs, behavioral modification tools, referrals, and resources will be made available to employees who desire to stop tobacco use.

3.4 Employee non compliance with the policy will result in disciplinary action.

3.5 Any questions regarding this policy should be referred to the local Human Resources and/or Health & Safety representative.

Sample Smoke-Free Policy

Name of Company

PURPOSE

To protect and enhance indoor air quality and contribute to the health and well-being of all employees, _____ shall be entirely smoke-free effective _____.

POLICY

Smoking will be strictly prohibited within all company work areas and public spaces, including conference rooms, reception areas, restrooms, stairwells, hallways, work stations, parking areas and company-owned vehicles.

This policy applies to all employees, clients, contractors and visitors. Copies of this policy shall be distributed to all employees. The company's policy will be posted at all entrances and throughout the building.

ASSISTANCE TO SMOKERS

Employees who smoke and would like assistance quitting may participate in stop-smoking programs offered by this company.

ENFORCEMENT OF POLICY

The success of this policy will depend upon the thoughtfulness, consideration and cooperation of smokers and nonsmokers. All employees share in the responsibility for adhering to and enforcing the policy.

Complaints

Persons observing a violation of this policy should bring it to the attention of their supervisor or the Health and Safety Committee.

Investigations

Supervisors or the Health and Safety Committee receiving a complaint will investigate and take action to resolve the issue as soon as possible.

Violators

Persons found to have violated this policy will be subject to disciplinary action in the same manner and magnitude as violations of other company policies.