

Nicotine Dependence Treatment and Recovery for People with BH Conditions: 2021 - 2023 Assessment Questions

December 2021

Note: Outlined below are key assessment questions developed over 2020 - 2021 by Oregon’s Nicotine Dependence Treatment and Recovery Expert Panel. The assessment phase of this project will address these questions using various methods. This document will be updated to reflect progress notes.

Questions From Expert Panel	Assessment Design Team Notes: December, 2021
<p>1. What do we know about how the current system for diagnosing and treating nicotine dependence for people with SUD and mental health issues is working? For example, among adults receiving treatment for substance use disorders or mental health conditions how many (or what proportion) are also receiving nicotine dependency treatment?</p> <p>Can this information be broken down by age, gender, and racial/ethnic, and disability characteristics to look for differences?</p> <p>What other information can we find specific to how many people in the target population are getting treated for nicotine dependency? For adults and for youth?</p>	<p>Rede will conduct an assessment with out-patient SUD facilities. Through this assessment, Rede will gather information about how these facilities are diagnosing and treating nicotine dependence. We will also assess practice and systems challenges (e.g., payment).</p> <p>On a smaller scale, Rede will collect information from CMHPs with a possible. This data collection effort may take the form of: 1) interviews with 3-4 CMHPs 2) group interviews with CMHPs. There is some sense that CMHPs may be more advanced in their work on this nicotine dependence treatment and recovery (see lines 637-38:11-5) Thus, mini-case studies could provide a source of information about promising approaches.</p> <p>Another possible data source is CCHBCs reporting data</p> <p>Rede/OHA will exhaust all options to use administrative databases (NSDUH, APAC, etc.) to find additional population-level information</p>
<p>2. How do providers bill for nicotine dependence treatment and how can that be made easier for them?</p>	<p>This topic is included in the literature and practice review. Beck and Alana are currently researching</p>

<p>3. Reimbursement rates are too low; what would it take to change them?</p>	<p>Rede to conduct policy research to inform answers to this question. Beck and Alana are currently researching</p>
<p>4. The system has made it v.difficult for CBOs (or any other “non” traditional providers to do this work (and get paid); why is it set up that way? What would it take to change this?</p>	<p>Rede to conduct policy research to inform answers to this question. Beck and Alana are currently researching</p>
<p>5. Nicotine dependency is not a primary billable diagnosis in substance use treatment; what would it take to change that?</p>	<p>Rede to conduct policy research to inform answers to this question. Beck and Alana are currently researching</p>
<p>6. Providers need more information/education about motivating clients to stop using tobacco/use the quit line and what the best treatment options are for clients/consumers. How can we do this?</p>	<p>This topic is included in the literature and practice review OHA conducted formative research earlier in 2021 that may inform this topic OHA\Rede can provide a comprehensive overview of what is happening now nationally and in Oregon to support providers</p>
<p>7. What do we know about the efficacy of in-person vs on-line and telephonic treatment? If providers and tobacco-users think that “in-person” is the most or only effective method, how is that impacting motivation?</p>	<p>This topic is included in the literature and practice review This topic can also be included in qualitative research</p>
<p>8. What information exists about culturally specific best-practices (for BIPOC, AI/AN, LGBTQ, immigrants, people with physical disabilities and other marginalized populations)? What can we learn about generational differences in co-occurring nicotine dependency and other behavioral health conditions?</p>	<p>This topic is included in the literature and practice review. Alana and Beck are currently researching</p>
<p>9. How can we continue to shift the cultural norms within this population? Is it still pretty normative to smoke? What more can we do with policy and other environmental supports?</p>	<p>Rede to conduct a qualitative research project to understand needs and conditions for SUD Providers. This research can be used to inform this question The assessment described on line 1 (above) will also assess policy and environmental supports</p>

<p>10. How can we incorporate peer-to-peer models into nicotine dependence treatment and recovery.</p>	<p>This topic is included in the literature and practice review. Alana and Beck are currently researching</p> <p>Rede is working with OHA to incorporate additional research into expanded scope of work.</p>
<p>11. What can we learn about how we are working and coordinating with the integrated healthcare system (PCPs, etc). How can this be improved?</p>	<p>Information collected from CMHPs can focus on integrated health care. Specifically, we can learn more about the Community Support Services model and Person Centered Primary Care Homes</p>
<p>12. How do we ensure that youth in the target group are considered and fully supported?</p>	<p>TBD</p>