Health	Section:	Reference
		DP-PPS-2
Drug Plan Policy	*Pharmacy Professional Services* *Previous: Claims Payment – Cognitive Services (PAS Policy Administered by Drug Plan and Extended Benefits Branch*	**Date of Issue** October 1, 2013 *Previous: June 3, 2009*

PARTNERSHIP TO ASSIST WITH CESSATION OF TOBACCO (PACT)
POLICY and PROCEDURE

POLICY

- Effective October 1, 2013, the Drug Plan and Extended Benefits Branch (DPEBB) will pay pharmacists $2.00/minute to a maximum of $300.00 per patient per year (365 days) to provide support and services to patients for cessation of tobacco as well as ten follow-up sessions under the Partnership to Assist with Cessation of Tobacco (PACT) program.

PURPOSE

- To achieve significant, realistic reductions in disease and death due to tobacco use by reducing tobacco use prevalence among Saskatchewan residents. As tobacco users successfully quit, there will be a residual decrease in exposure to second hand smoke to others as well.
- To aid in the identification of tobacco users and the offering of cessation support within a pharmacist's practice.
- To provide pharmacists with compensation for cognitive services in tobacco cessation support.
- To develop partnerships between tobacco users, pharmacists, prescribers and other health professionals to support successful cessation attempts.

ELIGIBLE CLIENTS/PRESCRIPTIONS

- An eligible client must be a beneficiary under the DPEBB. A beneficiary is a Saskatchewan resident with an active Health Services Number (HSN) and **not covered** under Workers Compensation, SGI, Non-Insured Health Benefits (NIHB), Veteran Affairs and Armed Forces.
- Clients are allowed to receive funded services under the PACT program once per year (365 days) only.

PROCEDURE

The Pharmacists' Association of Saskatchewan (PAS) will:

- Provide pharmacists with the PACT form "***Bronze/Bronze Plus***" for use with patients for the initial discussion.
- Provide pharmacists with the PACT forms "***Patient Assessment – Cessation of Tobacco***" and "***Patient Assessment - Review of Patient's Smoking/Tobacco Use"*** for utilization during the in-person interview for patient information collection and gathering.
- Provide pharmacists with the PACT form "***Personalized Cessation Care Plan***" to provide pharmacists with topics and tools to help track and assist discussion with patients and creation of the patient cessation plan.
- Provide pharmacists with the PACT form "***Personalized Cessation Care Plan Follow-Up***" for documentation of a Follow-Up Patient Assessment;
- Provide pharmacists with the PACT form "***Practitioner Communication Letter***" for communication with other healthcare professionals within the patient's circle of care after a Follow-Up Patient Assessment.
- Provide pharmacists with the PACT form "***Group Session Individual Consent and Registration***" for use as registration and consent for the patient to take part in the PACT program group counselling.
- Inform pharmacies about PACT program billing processes.
- Clarify PACT policy with pharmacies.

The Pharmacist will:

- Confirm patient eligibility.
- Obtain and document patient or patient representative consent using the PACT form "***Group Session Individual Consent and Registration***".
- Document patient information, any other relevant information and pharmacist time using the PACT forms:
  - Step 1: "***Bronze/Bronze Plus***"
  - Step 2A: "***Patient Assessment – Cessation of Tobacco***"
  - Step 2B: "***Patient Assessment - Review of Patient's Smoking/Tobacco Use"***
  - Step 3A: "***Personalized Care Plan***"
  - Step 3B: "***Personalized Care Plan Follow-Up***"
  - Step 4: "***Practitioner Communication Letter***"
  - Step 5: "***Group Session Individual Consent and Registration***"

- Submit no other forms unless they have be approved by the Drug Plan and Extended Benefits Branch prior to being used.
- Use only forms developed and/or approved by DPEBB. Forms developed by other organizations **must** contain all the information required for documentation and **must** be approved by the DPEBB prior to use.
- Store all documents for future use in a secure manner for a period of two (2) years from the date of provision of the last PACT service.
- Provide PACT information on a need to know basis provided the patient has consented.

The Pharmacy will submit:

Electronic claims* in the following manner:

- The claim must be submitted electronically via the Drug Plan using the appropriate pseudoDIN.
- Adjudicate benefit service as a one (1) day supply for one PACT service.
- Adjudicate DIN 00990100 for the Bronze level service fee of $5.00 per person per 365 days.
- Adjudicate DIN 00990101 for the Bronze Plus level service fee of $10.00 per person per 365 days.
- Adjudicate DIN 00990102 for the Silver/Gold level service fee to a maximum of 3 submissions and a maximum of $180.00 per person per 365 days.
- Adjudicate DIN 00990102 for the Silver/Gold level service fee when provided in a group session setting to a maximum of 3 submissions and a maximum of $150.00 per person per 365 days.
- Adjudicate DIN 00990103 for the Follow-up service fee to a maximum of 10 submissions and a maximum of $100.00 per person per 365 days.

* **Paper claims will not be accepted**.

The Drug Plan will:

- Provide pharmacies with the Partnership to Assist with Cessation of Tobacco (PACT) Policy document.
- Remunerate the PACT fee upon receipt of the electronic claim.
- Request documentation for the purpose of verification and evaluation as required. All required PACT forms may be requested.
- Recover the PACT fee(s), if upon verification, it is determined there was inappropriate submission for the fee(s).

APPENDIX A: CRITERIA

A) Bronze Level: Identification of Tobacco Users in Practice Site/ Assessing Stage of Change

- Maximum of 2.5 minutes to engage tobacco user in discussion about tobacco use and Stage of Change, referral to PACT trained pharmacist (see www.skpharmacists.ca) and/or Smokers' Helpline (1-877-513-5333 or www.smokershelpline.ca).
- Three questions:
  - Do you use tobacco? OR Are there any tobacco users in your home?
  - Are you willing to briefly discuss your smoking/tobacco use?
  - What do you think about quitting tobacco?
- Document Stage of Change using : "***Bronze/Bronze Plus*** "and the Pharmaceutical Information Program (PIP) patient profile (for non-PACT pharmacist).
- Document Stage of Change using : "***Bronze/Bronze Plus***" and PIP patient profile (for PACT trained pharmacist).
- Submit claim using PseudoDIN **00990100**.
- **Bronze Level Service: Maximum billable amount is $5.00 per patient per 365 days.**
- **Precontemplation**
  - Not thinking of quitting
  - Defensive/Not receptive to information
  - Pros < Cons
- **Contemplation**
  - Thinking of quitting in 6 months
  - May be receptive to input
  - Pros = Cons
- **Preparation**
  - Has made decision to quit in 1 to 2 months
  - Receptive to assistance
  - Pros > Cons
- **Action**
  - Quitting now or in a few days
  - Develops tobacco-free action plan and strategies to deal with triggers and relapse
- **Maintenance**
  - Has quit for six (6) months
  - Dealing with triggers, cravings and slips
  - Requires ongoing encouragement
  - May lead to Termination Stage (no longer tempted to use tobacco)

All pharmacists can provide and submit claims for Bronze Level Services. It is recommended that non-PACT pharmacists refer tobacco users to PACT pharmacists especially if it is determined that the tobacco user is in Preparation or Action stage.

Only PACT trained pharmacists can provide and submit claims for Bronze Plus, Silver and Gold Level Services and Follow-up.

B) Bronze Plus Level: Identification of Tobacco Users in Practice Site/Assessing Stage of Change/Conviction and Confidence Scores

- Maximum of 5 minutes to engage tobacco user in discussion about tobacco use, Stage of Change and level of **Conviction** and **Confidence**. If in **Contemplation**, **Preparation** or **Action** stage, and willing to enrol in the PACT program, provide with PACT service promotional materials and other information.

- Questions:
    - Do you use tobacco? OR Are there any tobacco users in your home?
    - Are you willing to briefly discuss your smoking/tobacco use?
    - What do you think about quitting tobacco? (Assess Stage of Change as in Bronze)

- Document time, Stage of Change, and Conviction and Confidence Scores using : "***Bronze/Bronze Plus***" and the PIP patient profile (for PACT trained pharmacist).

- Submit claim using PseudoDIN **00990101**.

- **Bronze Plus Level Service: Maximum billable amount is $10.00 per patient per 365 days.**

- **Conviction**
    - If you decided to quit, how would you benefit?
    - Reformulate, reinforce and refocus the answer
    - Ask to elaborate on personal reasons for quitting

- **Confidence**
    - If you really decided to quit tobacco, do you think you could do it?
    - What would prevent you from quitting?
    - How do you think you can overcome this barrier?

Low Conviction = Precontemplation
Medium Conviction = Contemplation
High Conviction = Preparation
High Conviction and Confidence = Action
Increase Conviction and then boost Confidence

C) Silver Level: Tobacco User Previously Indicates Quitting Tobacco within 6 months

- Collect patient's tobacco history, personal risk factors and motivations or barriers to cessation. Assess the tobacco user's Stage of Change, triggers for smoking and health beliefs. Discuss pharmacotherapy recommendations, and contact the patient's physician if necessary. (Estimated time: 30 to 60 minutes). Tobacco users already in Action stage may not need Silver Level intervention and may be able to go directly to Gold Level.

- Obtain patient consent using ***Patient Assessment – Cessation of Tobacco***".

- Document collected information and time using ***Patient Assessment – Cessation of Tobacco***" and "***Patient Assessment - Review of Patient's Smoking/Tobacco Use".***

- Use "***Personalized Cessation Care Plan***" to help track and assist with patient discussions and creation of the patient cessation plan.

- Submit claim using PseudoDIN **00990102** (see below for details).

D) Gold Level: Tobacco User is Ready to Quit

- Confirm QUIT date, review risks of tobacco use and motivation and benefits of quitting. Discuss strategies to handle slips or relapses and pharmacotherapy recommendations. Contact the patient's physician if necessary. Arrange follow-up by phone or in person. (Estimated time: 30 to 60 minutes).
- Obtain patient consent using "***Patient Assessment – Cessation of Tobacco***".
- Document collected information and time using ***Patient Assessment – Cessation of Tobacco***" and "***Patient Assessment - Review of Patient's Smoking/Tobacco Use".***
- Use "***Personalized Cessation Care Plan***" to help track and assist with patient discussions and creation of the patient cessation plan.
- Submit claim using PseudoDIN **00990102**.
- **Silver Level Service and Gold Level Service are billed using the same pseudoDIN.**
- **Silver Level Service and Gold Level Service: Maximum billable amount is $180.00 (90 minutes) per patient per 365 days, billable in a maximum of three appointments. For example, a tobacco user in Preparation stage may require one appointment of 45 minutes in Silver Level and a second appointment of 30 minutes in Gold Level, which would be billable as follows:**

  45 minutes (00990102) x $2.00/min = $90.00
  30 minutes (00990102) x $2.00/min = $60.00

  Another tobacco user may require three appointments, two in Silver Level and one in Gold Level, each 30 minutes in length. This would be billable as follows:

  30 minutes (00990102) x $2.00/min = $60.00 (Silver)
  30 minutes (00990102) x $2.00/min = $60.00 (Silver)
  30 minutes (00990102) x $2.00/min = $60.00 (Gold)

  This would be the maximum number of claims that could be processed (3) and the maximum dollar amount paid for Silver/Gold Level Services ($180.00). In the previous example, services are billed only twice for a total of $150.00. The total minutes and number of claims can occur in any combination as long as they do not exceed $180.00 total (90 minutes) in three sessions.

E) Proposed Follow-up: On Quit Day, Day 3, Day 7, Day 14 to 21, Day 30, Day 60, Day 90, Day 120, Day 180 to 240 and Day 300 to 365

- Determine smoking status and ensure adherence with/tolerance of pharmacotherapy.
- Discuss triggers, cravings, withdrawal, slips and relapses, coping strategies, and quit tips and tricks.
- Facilitate problem solving.
- Provide behaviour modification strategies.
- Follow-up will consist of a phone call or in person discussion. (Estimated time per contact: 5 minutes)
- Document using "***Personalized Cessation Care Plan Follow-Up***".
- Submit claim using PseudoDIN **00990103**.

- **Follow-up Service: Maximum billable amount is $100.00 per person per 365 days which includes 10 follow-up sessions billable at $10.00 each. It is recommended that the majority of follow-up sessions occur at the beginning of the cessation attempt when the patient is most likely to slip or relapse.**

F) Group Sessions

- **Silver Level and Gold Level services are provided in a group setting for more than one patient at a time.**
- Obtain patient consent using "***Group Session Individual Consent and Registration***"**.**
- Submit claim using PseudoDIN **00990102**.
- Document using "***Group Session Individual Consent and Registration***"
- If individual counselling or follow-up is required for a patient after a group session, document using "***Group Session Individual Consent and Registration***"**.**
- **Group Session Service: Maximum billable amount is $150.00 per patient per 365 days ($1.00 per minute to a maximum of 150 minutes).**
- **Billing of Follow-up is allowed as described above.**

Table 1: Billing Procedure for PACT Claims

PACT PROGRAM FEES:

- The claim must be submitted electronically to the Drug Plan.
- The Drug Plan pays 100% of the fee to the pharmacy.
- Please ensure the following fields are completed:

  - PATIENT IDENTIFIER = client nine-digit Health Services Number (HSN)
  - DISPENSING DATE = date of the PACT service (e.g. October 1, 2013)
  - RX NUMBER = enter your sequential Rx#
  - HEALTH PROVIDER ORGANIZATION ID = SKCP
  - HEALTH PROVIDER ID = Pharmacist ID number
  - PHARMACIST ORGANIZATION ID = SK
  - PHARMACIST ID = Pharmacist ID number
  - DIN = DIN for the Level of service

Level	PseudoDIN	Comment
Bronze	00990100	Maximum of 1 submission at $5.00 (2.5 minutes) per patient per 365 days
Bronze Plus	00990101	Maximum of 1 submission at $10.00 (5 minutes) per patient per 365 days
Silver/Gold	00990102	Maximum of 3 submissions totalling 90 minutes ($2.00 per minute) for a maximum of $180.00 per patient per 365 days
Silver/Gold Group Session	00990102	Maximum of 3 submissions totalling 150 minutes ($1.00 per minute) for a maximum of $150.00 per patient per 365 days
Follow-up	00990103	Maximum of 10 submissions totalling 50 minutes ($2.00 per minute) at $10.00/submission for a maximum of $100.00 per patient per 365 days

  - COMPOUNDING FEE (CF) = 0
  - COMPOUND NAME = blank
  - QUANTITY (QTY) = 1
  - DAYS SUPPLY = 1
  - ACQUISITION COST (AC) = Total time of the session x $1.00 or $2.00 per minute (e.g. if a 5 minute session, enter $10.00)
  - DISPENSING FEE (DF) = 0.00
  - MARKUP = 00/00/00
  - TOTAL RX COST = Total dollar value billed (Actual time in minutes x $1.00 or $2.00)
  - PATIENT PAID = $0.00
  - ADJUDICATION FLAG = Y