
Oklahoma Tobacco Helpline

FY23 Evaluation Report



A Program of TSET

Prepared by:

Dept. of Biostatistics & Epidemiology, OUHSC

Laura A. Beebe, PhD & Lindsay Boeckman, MS

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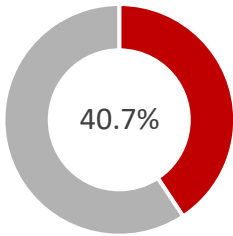
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Key Findings



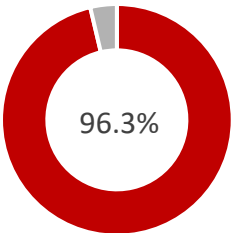
Enrollment

25,845 tobacco users in Oklahoma registered for services from the Oklahoma Tobacco Helpline during FY23. This is 22% higher than FY22.



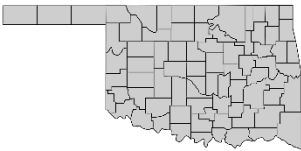
Quit Rates

At the 7-month follow-up evaluation, **40.7%** of Helpline participants reported not using tobacco for 30 or more days.



Satisfaction

Almost all Helpline participants (**96.3%**) are very, mostly or somewhat satisfied with the services they received.



Statewide Coverage

Tobacco users in **all 77** counties registered for Helpline services during FY23.



Reach

3.4% of all tobacco users in the state received evidence-based cessation services from the Helpline.



Referrals

13,675 referrals to the Helpline were received from health care providers and community centers. These referrals led to **1374** Helpline enrollments.

Introduction

The Department of Biostatistics and Epidemiology within the University of Oklahoma Health Sciences Center is the independent evaluator for the Oklahoma Tobacco Helpline. The evaluation team uses registration data from the Helpline service provider, RVO (formerly Optum), to report registration and utilization patterns. Participant satisfaction with Helpline services and participant success in quitting tobacco are evaluated through a 7-month follow-up survey of a random sample of registrants. Professional Data Analysts (PDA) is contracted to conduct the follow-up survey.

In March 2023, the Helpline transitioned to a new platform called Rally Coach™ and this changed how and what services were received. It is important to note that the enrollment experience is now blended to include both registration and session delivery during the first interaction. As a result, intake questions are no longer asked as a single survey but spread across assessments that occur at different times during a coaching session. The registration experience online has also been modified to engage the tobacco user earlier in strategies to facilitate their quit. This results in some missing data as noted in this evaluation report.

Because of the significant changes to the Oklahoma Tobacco Helpline as a result of the transition to Rally, this annual report will summarize data overall, and by platform, when appropriate. Another change from FY22 is that HealthChoice participants are not included in this report. With the transition to Rally, data for HealthChoice participants were less complete and their services were tracked differently. The Helpline experience of the 254 HealthChoice participants during FY23 will be summarized in a separate report.

During FY23, the Oklahoma Tobacco Helpline provided services under the Apollo platform until February 28, 2023. These services included phone, web, text messages, emails, and nicotine replacement therapy (NRT). Tobacco users could choose **Individual Services**, which do not include telephone counseling. Any participant, regardless of health insurance status, could select one or more of the following: a starter kit (2-weeks) of nicotine replacement therapy (NRT) with a follow-up telephone call, text messages, emails, and a Quit Guide. Another option for tobacco users not wanting to interact with a coach via telephone is **WebCoach**, which includes web-based assistance with quitting, with optional NRT (2-week starter kit), text messages, emails, and a downloadable Quit Guide.

Under Apollo, tobacco users could also choose the traditional telephone counseling program (Helpline) with optional NRT, web-based assistance, text messaging, emails, and a Quit Guide. Health insurance status determines who is eligible for the single call program versus the multiple call program. Tobacco users with private insurance are only eligible for the **single call** telephone intervention plus two weeks of NRT. State employees with HealthChoice are eligible for the **multiple call** program (which includes up to 10 proactive calls from a Quit Coach) and up to 12 weeks of NRT. Uninsured, Medicaid and Medicare recipients are eligible for the multiple call program with up to 8 weeks of free combination NRT. Pregnant smokers, regardless of insurance status, receive a 10-call Helpline intervention specifically designed for the special needs of these women. With a medical override, pregnant women can receive additional NRT. The Helpline also offers a specialized protocol for tobacco users with behavioral conditions. Participants choosing the Behavioral Health Program (BHP) are eligible for 7 proactive calls with a coach and up to 12 weeks of combination NRT.

On March 1, the Oklahoma Tobacco Helpline transitioned to the Rally platform. This new quitline program delivery model continues to leverage live coaching but adds multiple opportunities for digital engagement to support a user's quit experience. Live chat, live texting, coach-led group video sessions, online courses, and milestone-driven action cards are available to supplement traditional phone coaching. Direct mail order of NRT and online access remain program components, along with online and referral enrollment methods. Under Rally, the Helpline no longer has programs called multiple call, single call, WebCoach and individual services. Instead, tobacco users choose which methods they prefer, and insurance status determines eligibility for either Standard Care Coach or Coach+ services. Coach+ is available to most tobacco users and includes 5 sessions and up to 8 weeks of mono or combo NRT. Those with private insurance are eligible for Standard Care Coach, which includes 5 sessions and 2 weeks of mono NRT. A session may be a one-on-one interaction with a coach via phone, text or chat, or a coach-led group video session. Upon enrollment, tobacco users may be further stratified to receive one of the enhanced programs, such as pregnancy or behavioral health.

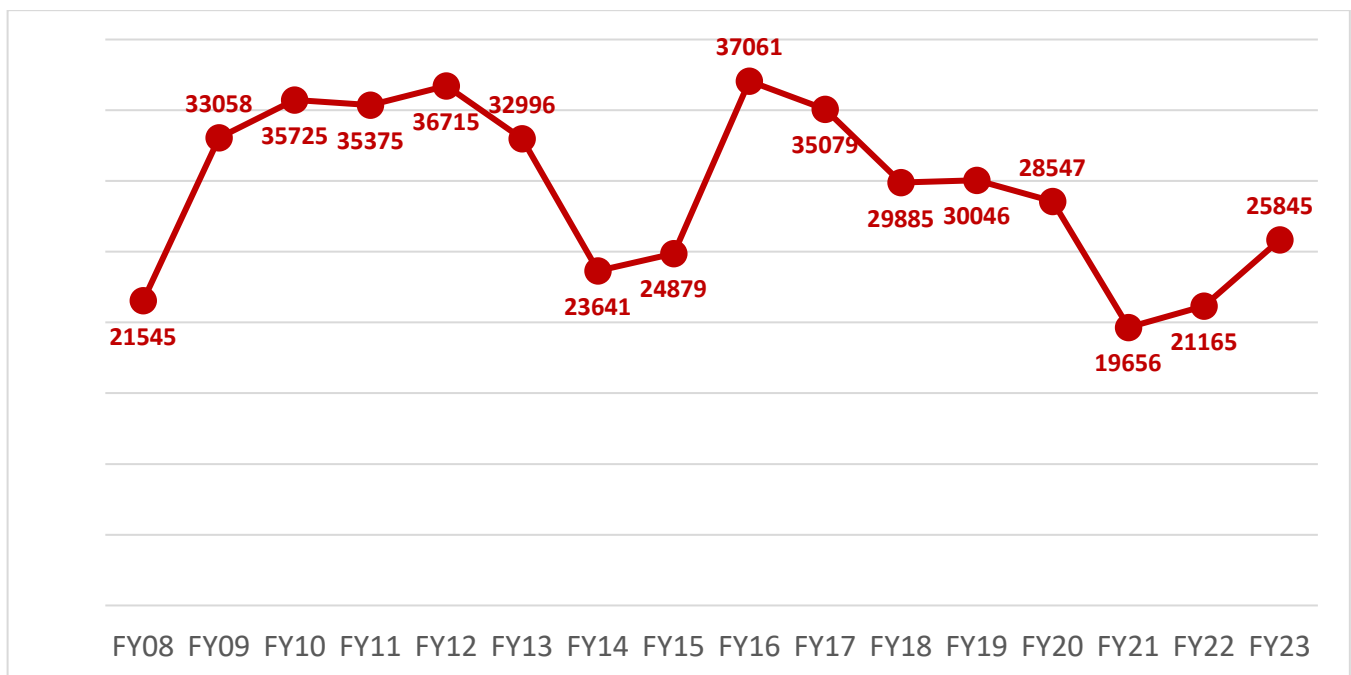
The FY23 evaluation demonstrates that the Oklahoma Tobacco Helpline continues to provide a valuable and necessary service to Oklahoma residents across the state. Both the total number of tobacco users registering for services, and the treatment reach for the Helpline were greater in FY23

as compared to FY22. Among those tobacco users utilizing the service, there continued to be good representation from groups with disparities in tobacco use and related health outcomes.

Oklahoma Tobacco Helpline Registration Trends

During FY23, from July 1, 2022 through June 30, 2023, a total of 25,845 tobacco users registered for services by calling the 1-800-QUITNOW telephone number, registering online or by a referral from a healthcare provider. This is 22% higher than what was observed in FY22 (n=21,165 tobacco users).

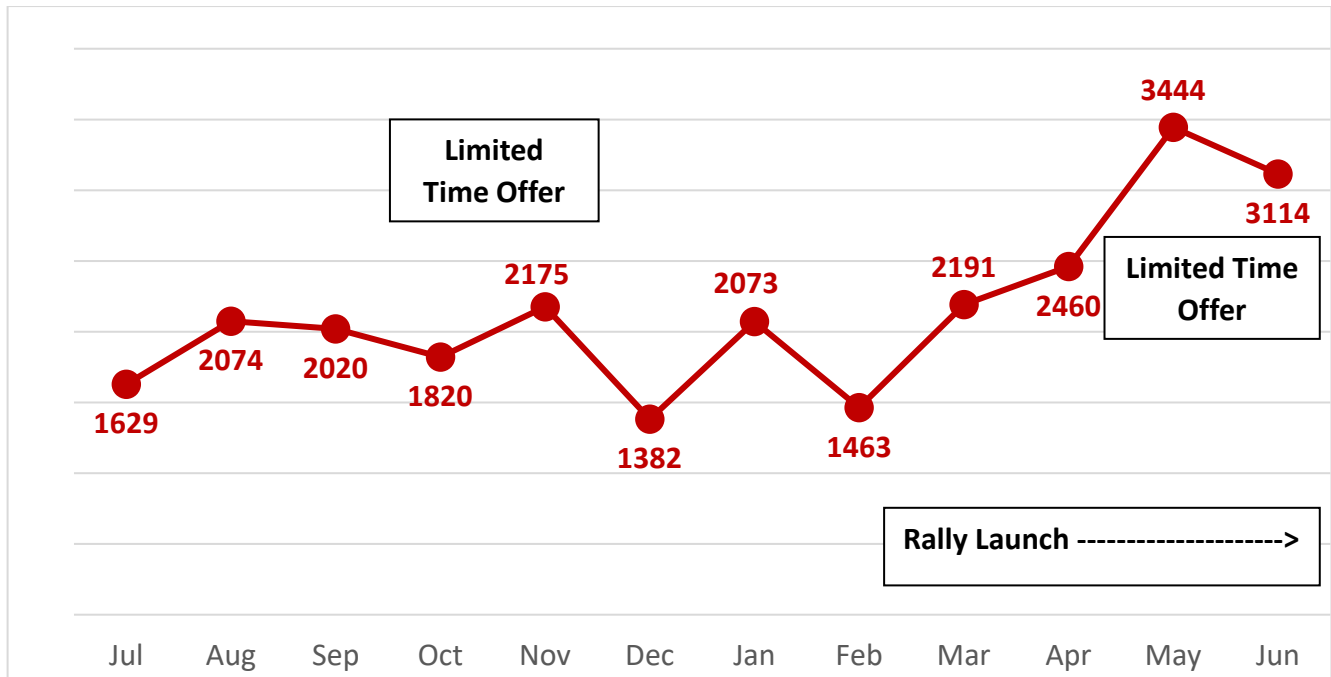
Figure 1. Tobacco users registering with the Helpline by FY



Helpline registrations also varied by month within the FY. Following the transition to Rally March 1, enrollments increased dramatically. The increase was primarily driven by a larger number of online registrations (Figure 2).

In an effort to increase the utilization of Helpline services, two “Limited Time Offers” (LTO) were launched, expanding eligibility for 8 weeks of free NRT to all registrants. The dates for these promotions were October 31 – November 30, 2022 and May 1 – June 30, 2023. There was a significant increase in registrations during the May/June PTO.

Figure 2. Tobacco users registering with the Helpline by month, FY23 (n=25,845)



Utilization of Helpline Services, FY23

Helpline services changed dramatically with the transition to the Rally platform. Thus, program enrollment is reported separately by platform (Table 1). Of the 14,636 tobacco users registering under Apollo and before March 1, 46.7% (n=6829) registered for Individual Services without the call program. Another 3521 (24.1%) enrolled in the multiple call proactive telephone cessation program (not including Behavioral Health and Pregnancy), and 1000 (6.8%) enrolled in the single call telephone cessation program. After the transition to Rally, 42.0% enrolled in Standard Care Coach+, and 19.4% in Standard Care Coach. More than a third (35.6%) of tobacco users enrolled in the Behavioral Health Program, a dramatic increase when compared to Apollo. Similarly, the number of pregnant/post-partum women registering for services increased under Rally.

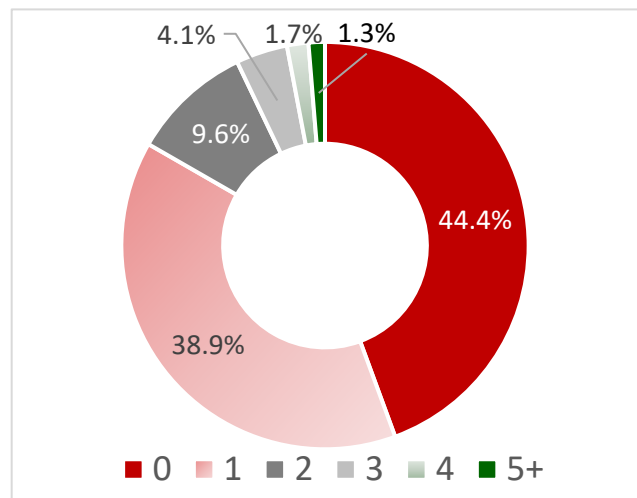
Table 1. Helpline registrants by service and platform, FY23 (n=25,845)

Apollo	N	%	Rally	N	%
Single call	1000	6.8%	Standard Care Coach	2175	19.4%
Multiple call*	3521	24.1%	Standard Care Coach +	4707	42.0%
Individual Services	6829	46.7%			
WebCoach	986	6.7%			
Behavioral Health*	2176	14.9%	Behavioral Health	3990	35.6%
Pregnancy/Post-partum*	124	0.8%	Pregnancy/Post-partum	337	3.0%
Total Apollo	14,636		Total Rally	11,209	
FY23 Total Enrollments N = 25,845					

*previously included Behavioral Health and Pregnancy protocol participants. These are reported separately in this table to align with Rally data.

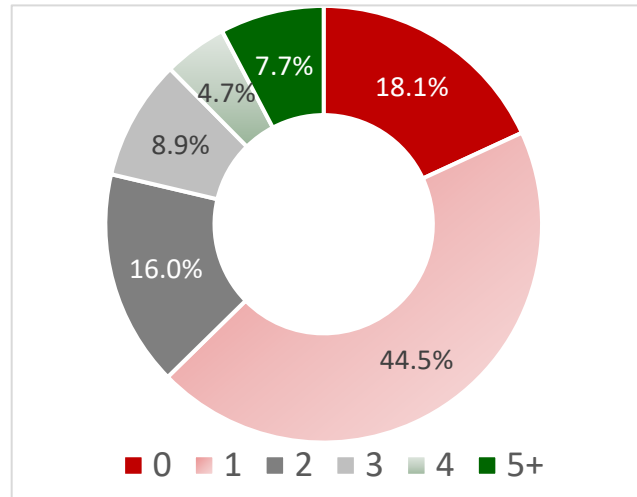
Helpline service utilization among registrants is reported as number of coaching sessions completed and NRT received, separately for Apollo and Rally registrations. While the Rally platform allows tobacco users to engage in coaching sessions using multiple modalities (phone, chat, group, and text), only 55.6% completed a session (Figure 3), and 98.0% of them completed a coaching call. Overall, only 2.1% of those completing a session used more than one modality.

Figure 3. Number of coaching sessions completed (phone, chat, group or text), Rally platform, FY23 (n=11,209)



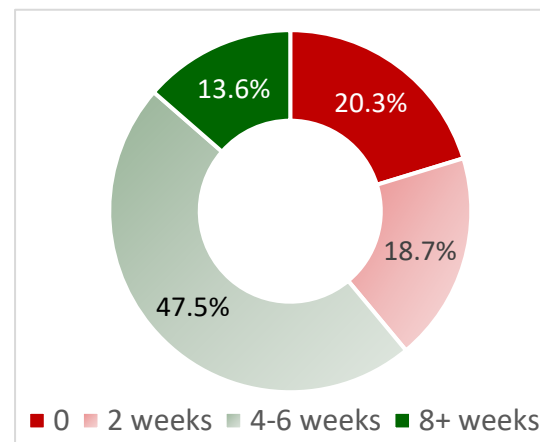
Under the Apollo platform, only tobacco users enrolling in a call program were eligible to receive a coaching call. Within that eligible cohort, 18.1% did not complete a call. Less than half completed only one call (44.5%).

Figure 4. Number of completed calls with a coach among telephone program participants, Apollo platform, FY23 (n=6957)



Tobacco users who want to quit may also receive NRT from the Helpline, and the vast majority (80%) did (Figure 5). One out of five tobacco users received no NRT from the Helpline, which could be attributed to contraindications for its use, or participant preference to not use NRT. Almost half (47.5%) received 4-6 weeks of NRT.

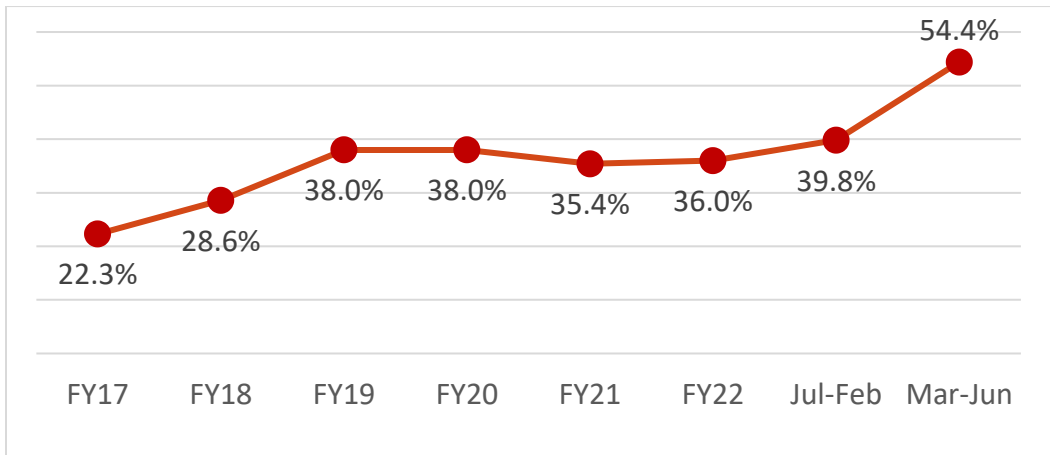
Figure 5. Weeks of NRT received from the Helpline among tobacco users registering for services, FY23 (n=25,845)



Mode of Entry: Telephone and Online Registrations during FY23

Tobacco users can register for Helpline services by calling 1-800-QUITNOW or visiting the Helpline webpage at www.okhelpline.com. In FY23, from July through February, 39.8% of tobacco users registering for services did so online and 51.9% registered by phone. Another 8.3% registered via a referral. With the transition to Rally in March 2023, 54.4% registered online and 43.5% by phone. Overall for FY23, 46.1% of tobacco users registered online. Online registrations have gradually increased since FY17 (Figure 6).

Figure 6. Online registrations for the Helpline, FY17-FY23

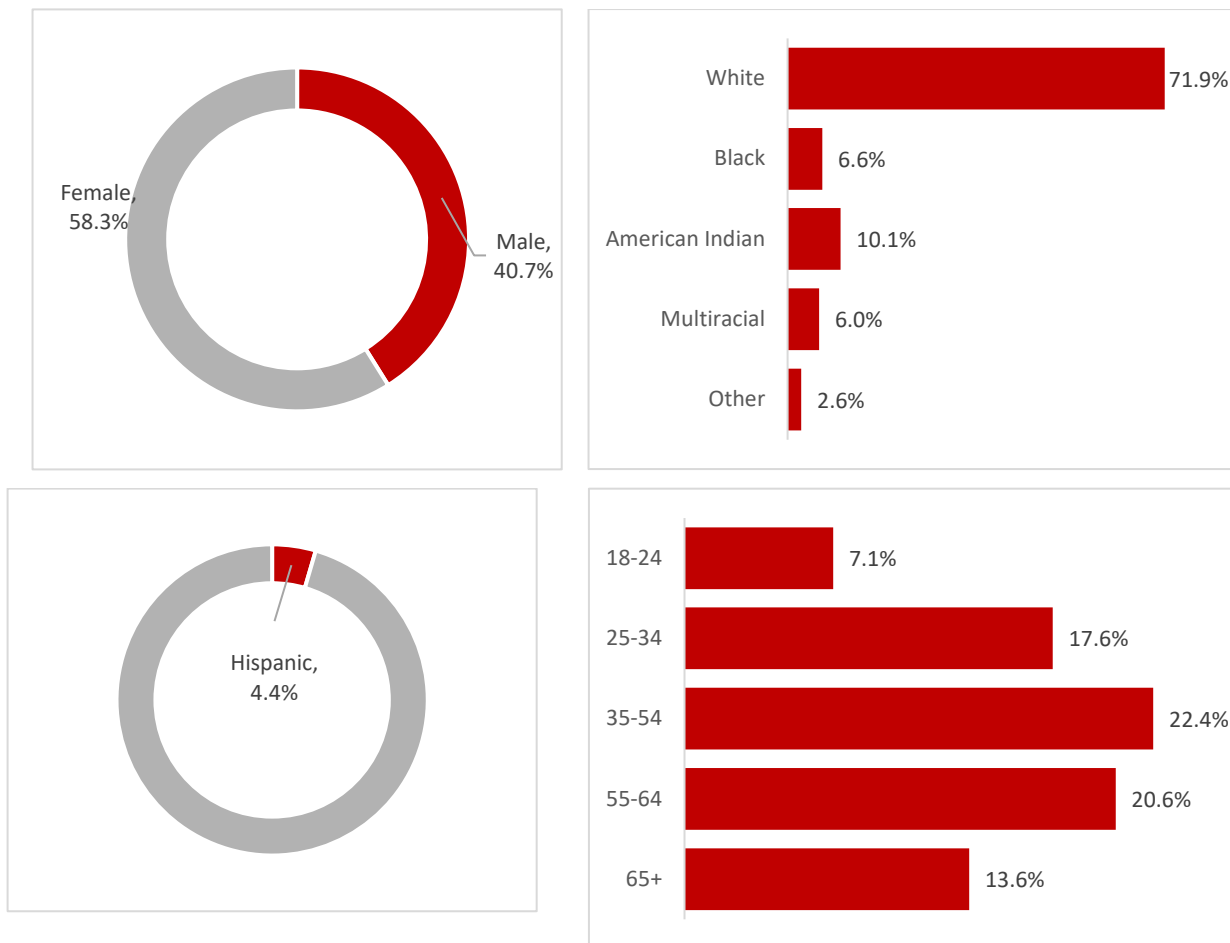


Demographic Characteristics of Tobacco Users Registering during FY23

Demographic characteristics were collected and reported for **25,845 tobacco users** registering for services. A limited set of demographic questions were asked of tobacco users registering for Individual Services and via the website through the Apollo platform; thus, some variables in the table below have a high number of “missing” responses (see appendix for complete data).

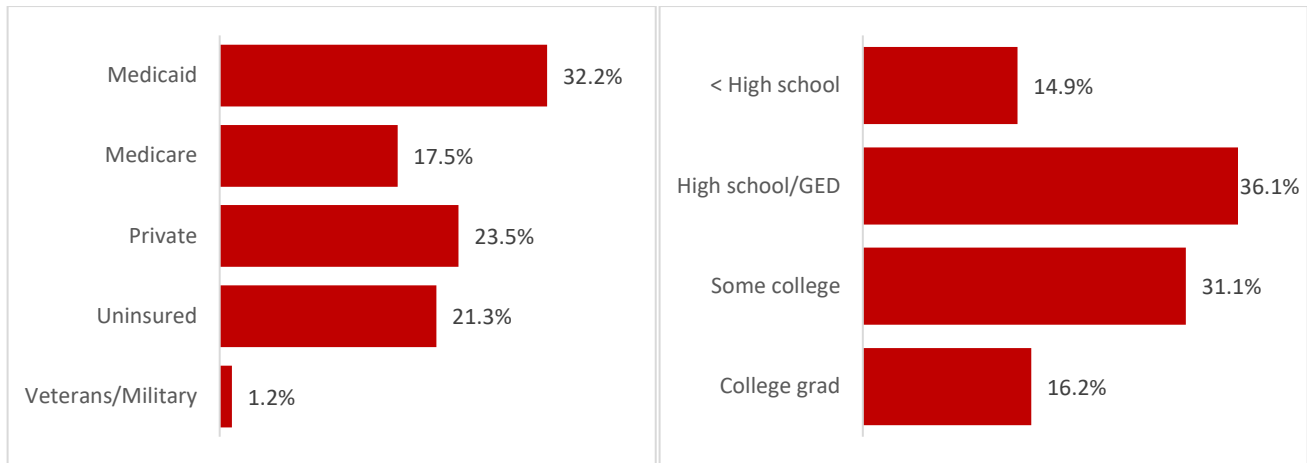
More than half (58.3%) of tobacco users registering with the Helpline were female. Registrants were also mostly white (71.9%) and non-Hispanic (95.6%). Six percent of registrants identified as multiracial. More than 10% of registrants identified as American Indian. The age distribution of tobacco users registering for Helpline services skewed slightly older, with one-third of registrants 55 years or older (34.2%).

Figure 7. Sex, race, ethnicity and age of Helpline registrants, FY23



Consistent with prior years, 14.9% of Helpline registrants had less than a high school degree. In addition, 32.2% of tobacco users registering were Medicaid recipients, and 21.3% were uninsured. This distribution continues to reflect Medicaid expansion and the limited time offer for expanded services, which greatly increased access to more intensive Helpline services. More than 6% of registrants reported being active service military or a veteran/retired member including Reserve and National Guard.

Figure 8. Insurance and educational attainment of Helpline registrants, FY23



Detailed tables with demographic data can be found in the appendix.

Tobacco Users Reporting Mental Health and Substance Abuse Disorders

One of the most significant changes to the registration process under the Rally platform is the triaging of tobacco users who report one or more mental health and/or substance abuse problems. If they also respond “Yes” or “Don’t know” to the question, “Do you think this will make it harder for you to quit?” they become eligible for the Behavioral Health Program. Participants choosing the BHP are eligible for 7 proactive calls with a coach and up to 12 weeks of combination NRT. The program also includes an enhanced stress assessment and a specially trained coaching team. BHP participants can also choose to involve their health care provider. In this case, a letter to the mental health or other provider is sent informing them of the participant’s intentions to quit tobacco and how the provider can support the participant’s quit efforts.

In FY23, more than half (55.7%) of tobacco users registering for services reported having at least one mental health or substance abuse disorder. Of the Helpline registrants who reported at least one MHSA disorder, 40.3% believed their condition would interfere with their ability to quit tobacco, while 20.2% did not know if their condition would interfere with the ability to quit tobacco. These

tobacco users were offered a specialized protocol for tobacco users with behavioral conditions. Participants choosing the Behavioral Health Program (BHP) are eligible for 7 coaching sessions and up to 12 weeks of combination NRT. In FY23, 6166 tobacco users participated in the BHP, almost double the number from FY22 (n=3161). Participation in the BPH was more frequent after the launch of the Rally platform (Table 2).

Table 2. Helpline registrants reporting behavioral health conditions, by platform, FY23

	Apollo	Rally
Number (%) reporting 1+ MHSAD	7444 (58.0%)	5950 (53.1%)
Among those reporting MHSAD, number (%) reporting this will make it harder to quit (Yes and Don't know responses)	3890 (52.4%)	4195 (70.5%)
Among those with a MHSAD, number (%) ever enrolling in BHP	2176 (29.2%)	3990 (67.1%)

Helpline Utilization by Pregnant Women

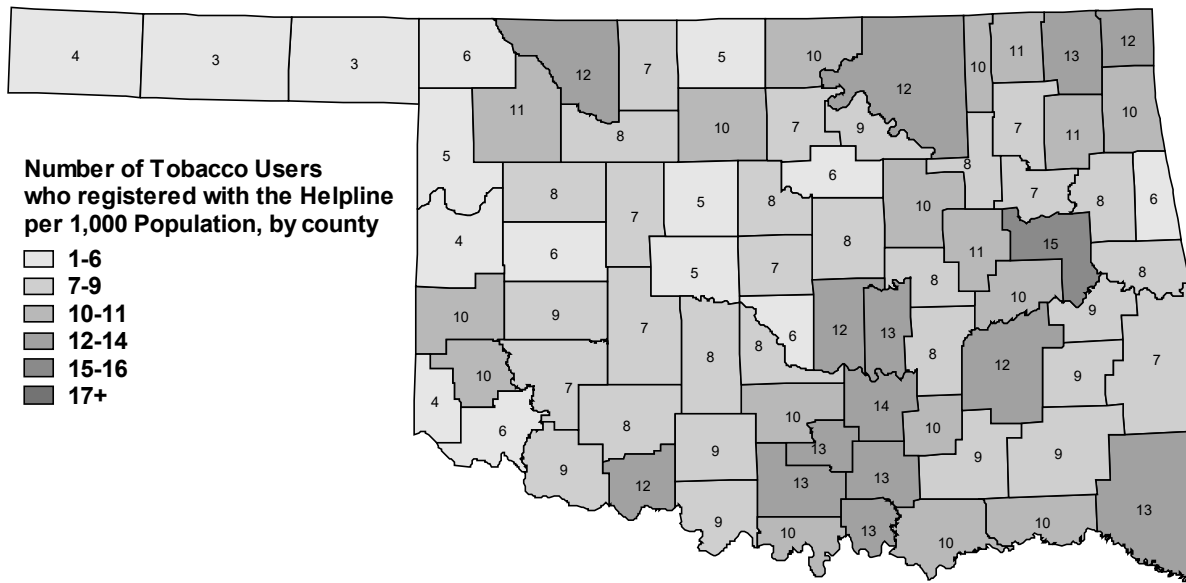
During FY23, 461 tobacco users who were pregnant, breastfeeding or planning pregnancy accessed the Helpline for assistance quitting smoking. These women were eligible for an enhanced program that included 7 coaching sessions and up to 8 weeks of NRT.

Geographic Distribution of Tobacco Users Registering for Services

The Oklahoma Tobacco Helpline is reaching tobacco users in all parts of Oklahoma. The map displays the number of registrations per 1,000 county population over the age of 18. When the number of Helpline registrants per adult population is considered, some of the less densely populated counties had the greatest number of tobacco users registering for services per 1000 adults. For example, Muskogee had the highest rates of registration, with 15 registrants per 1000 adult population, and Pontotoc had 14 registrants per 1000 adult population. Carter, Craig, Johnston, McCurtain, Marshall, Murray, and Seminole counties each had 13 registrants per 1000 adult population.

Tobacco users from all 77 Oklahoma counties contacted the Helpline for services in FY23. Of tobacco users registering for services, 17.3% came from Oklahoma County (n=4407) and another 16.1% came

from Tulsa County (n=4106). Cleveland County accounted for 6.0% of registrations (n=1523). See appendix for county specific data.



Tobacco Use Patterns among Registrants

Among tobacco users registering for services, 43.1% reported smoking <1 pack of cigarettes a day (Table 3). About half of those responding stated that the time after waking to first tobacco use was five minutes or less (50.5%).

Table 3. Tobacco use patterns among registrants, FY23 (n=25,845)

Category		N	%
Time to first cigarette after waking	5 minutes or less	11804	50.5%
	6-30 minutes	7892	33.8%
	31-60 minutes	2166	9.3%
	>60 minutes	1507	6.4%
Number of cigarettes per day	<1 pack	8935	43.1%
	1 pack	6787	32.8%
	>1 pack but < 2	2748	13.3%
	2 packs +	2133	10.3%
	None (OTP user)	117	0.6%

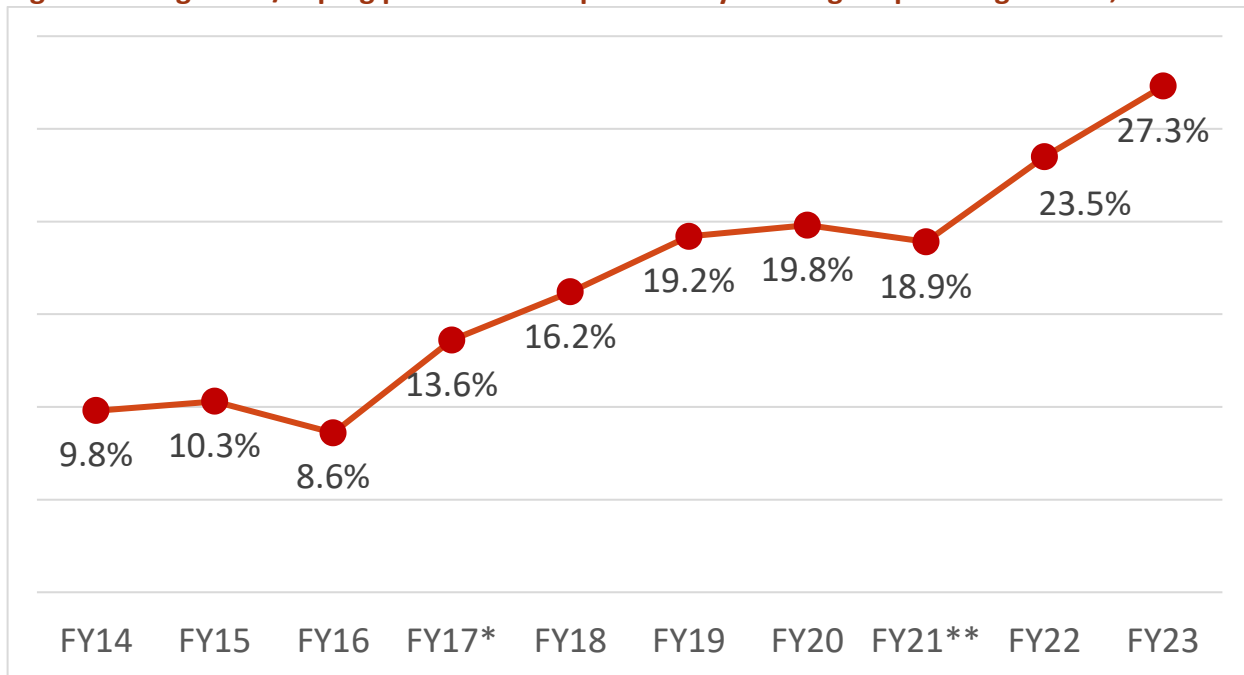
Cigarettes were the predominant form of tobacco used by Helpline registrants in FY23 (Table 4). Starting August 16, 2022, Helpline registrants were asked if they smoke menthol cigarettes. Among cigarette users, 27.8% reported smoking menthols. Nearly 1 out of 4 registrants were using more than one product.

Table 4. Types of tobacco/nicotine products used among registrants at enrollment, FY23

Tobacco/Nicotine Product	%
Cigarette	83.7%
Menthol cigarettes (among cigarette users)	27.8%
Cigar/cigarillo	8.0%
E-Cigarette	27.3%
Pipe	1.2%
Smokeless tobacco	9.5%
Water pipe	0.2%
Any combustible tobacco	86.0%
Used multiple tobacco products - 2 or more (including Cigarette, Cigar, Pipe, Smokeless, Waterpipe)	10.4%
Used multiple tobacco/nicotine products - 2 or more (including Cigarette, Cigar, Pipe, Smokeless, Waterpipe, E-cigarette)	24.8%
Used e-cigarette or vaping product and cigarettes in the past 30 days	17.3%
Used e-cigarette or vaping product ONLY in the past 30 days	9.0%

E-cigarettes were used in the last 30 days by 27.3% of registrants, but only 9% were exclusively using e-cigarettes. This is the highest level of e-cigarette use among registrants observed (Figure 9). Six out of 10 e-cigarette users (60.5%) report using them every day.

Figure 9. E-cigarette/vaping product use in past 30 days among Helpline registrants, FY14-FY23



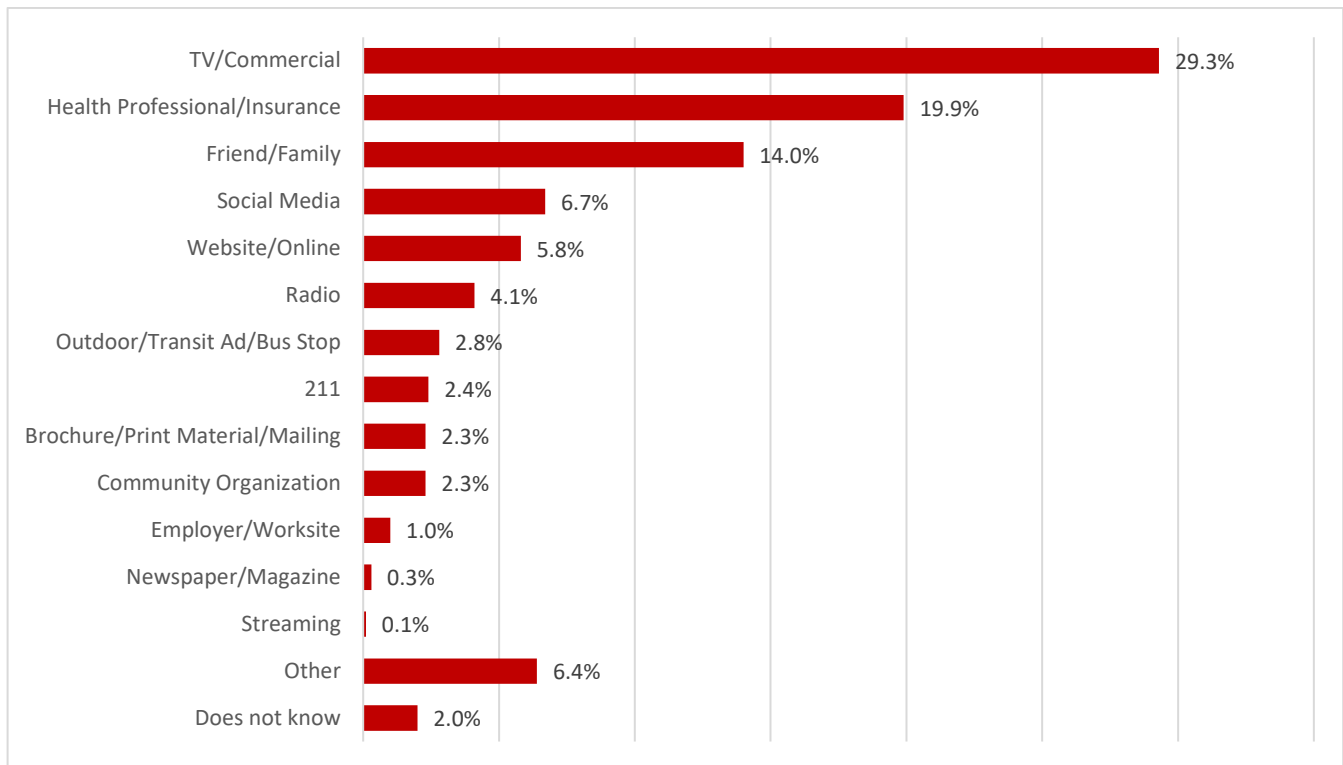
*In FY17 the e-cigarette questions asked at registration changed to capture use during the past 30 days. Previously registrants were asked about current use at the time of Helpline registration.

** Data only available through mid-March 2021.

How do registrants hear about the Helpline?

When tobacco users register for services with the Helpline, they are asked how they heard about the service. This question provides one indicator of Helpline promotion within the community. During FY23, hearing about the Helpline from TV was the most frequent response (29.3%, Figure 10). The next most frequent response was Health Professional/Health Insurance (19.9%) followed by Friend/Family (14.0%).

Figure 10. How registrants heard about the Helpline, FY23 (n=25,845)



Fax, Electronic and Online Referrals

Referrals offer the opportunity for health care providers and other agencies to proactively request that the Helpline contact their patients or clients who want help quitting tobacco. Fax referrals continue to be an option for many providers, especially in rural areas. Electronic referrals are incorporated into electronic health records, while online referrals occur via a web portal. Overall number of referrals in FY23 (n=13,675) was higher than FY22 (n=12,967), but the number of tobacco users actually registering for services as a result of a referral was lower (n=1374 in FY23 compared to n=1726 in FY22). The proportion accepting a referral and enrolling in Helpline services was meaningfully different when comparing the Apollo platform (12.2%) to the Rally platform (n=5.5%). Table 5 provides detailed data related to the three different referral options with outcome data overall and by referral type. Data are included in the appendix for Apollo and Rally referral data separately.

Table 5. Electronic, fax, and online referrals to the Helpline, FY23 (n=13,675)

	Type of Referral						All Referrals Combined	
	Electronic Referral		Fax Referral		Online Referral*			
Referral Status	N	%	N	%	N	%	N	%
Accepted & enrolled in services	434	8.0%	179	18.5%	761	10.4%	1374	10.0%
Accepted but didn't enroll	10	0.2%	1	0.1%	9	0.1%	20	0.1%
Declined services when contacted	742	13.7%	142	14.7%	841	11.5%	1725	12.6%
Unreachable	3197	59.2%	534	55.3%	4761	65.1%	8492	62.1%
Duplicate referral	394	7.3%	22	2.3%	75	1.0%	491	3.6%
Already enrolled at time of referral	137	2.5%	23	2.4%	688	9.4%	848	6.2%
Not enough info/Do not contact	216	4.0%	8	0.8%	26	0.3%	250	1.8%
Pending referral	271	5.0%	56	5.8%	148	2.0%	475	3.5%
<i>Total</i>	<i>5401</i>		<i>965</i>		<i>7309</i>		<i>13675</i>	

*includes 64 "self-referrals" through an OHCA web portal

Treatment Reach of the Oklahoma Tobacco Helpline

Treatment reach measures the proportion of tobacco users across the state that received evidence-based services from the Oklahoma Tobacco Helpline. The population of tobacco users is estimated based on the Behavioral Risk Factor Surveillance Survey (BRFSS). Because the 2022 BRFSS asked about both cigarette and smokeless tobacco use, *the Helpline treatment reach is also examined separately for cigarette smokers and smokeless tobacco users*. Only Helpline callers who completed an intervention call, coaching session (Rally platform) or who received NRT from the Helpline are counted as having received treatment.

In FY23, 19,540 registrants completed an intervention call, coaching session, and/or received NRT from the Helpline, resulting in a treatment reach of 3.4% of Oklahoma tobacco users (Table 6). Treatment reach among cigarette smokers (4.2%) was higher than treatment reach among smokeless tobacco users (1.3%). Treatment reach among females was two times higher than treatment reach among males (5.0% vs. 2.4%). African Americans had higher treatment reach than

American Indians (3.4% and 2.4%, respectively). Overall, treatment reach was 26% higher in FY23 as compared to FY22.

Table 6. Treatment reach of the Oklahoma Tobacco Helpline, FY23

Population Subset	Number Completed Intervention	Population of Tobacco Users*	Treatment Reach
All tobacco users	19,540	569,048	3.4%
Cigarette smokers	18,521	441,565	4.2%
Smokeless tobacco users	2,093	162,824	1.3%
Females	11,216	222,549	5.0%
Males	8,172	346,499	2.4%
African Americans**	1,484	43,507	3.4%
American Indians**	2,923	119,415	2.4%

*Fiscal year 2023 enrollment is compared to the population of cigarette smokers and smokeless tobacco users (18+ years old) from BRFSS 2022

**American Indian and African American Helpline and BRFSS participants selected alone or with multiple races

Follow-Up of Helpline Registrants for Evaluation

The North American Quitline Consortium (NAQC) recommends a standardized approach for assessing program outcomes for quitline services across the US and Canada. At a minimum, NAQC recommends that state quitlines conduct a follow-up survey of a random sample of quitline callers 7-months following quitline enrollment. Thirty-day point prevalence abstinence is the preferred measure of “success.” Although NAQC established a 50% response rate to the follow-up survey as the benchmark for reporting valid quit rates, recent experience and evidence have resulted in revised recommendations by NAQC (August 2021, Quit Rate Discussion paper). Beginning with the FY22 Annual Survey, NAQC will only publish and share quit rates from quitlines that achieve a minimum response rate of 45% and a sample size of 400 completed surveys.

The follow-up of Oklahoma Tobacco Helpline participants in this FY23 report includes tobacco users registering for services between December 1, 2021 and November 30, 2022. The 7-month follow-up

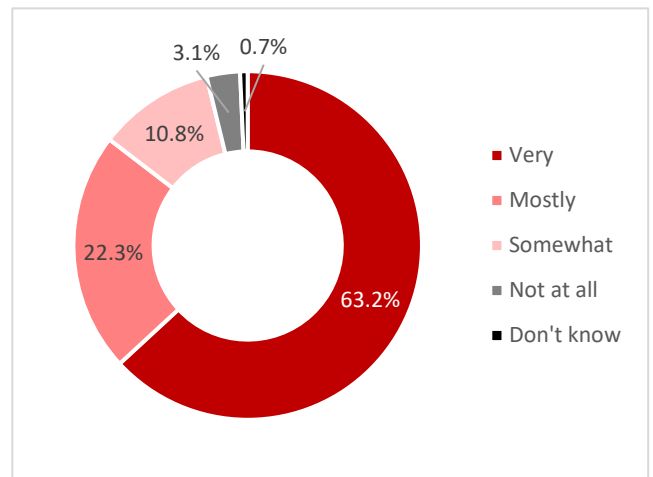
survey was conducted from July 16, 2022 through July 14, 2023. Thus, all evaluation participants received services under the Apollo platform.

To conduct the follow-up evaluation, a random sample of participants in the different service programs was selected. Despite significant attention and resources, the response rate to the 7-month follow-up was 45.7%. Only 5.3% of participants contacted refused to participate in the follow-up study, similar to prior years. The remainder of non-respondents included those who could not be contacted during follow-up. A total of 1,481 participants completed the 7-month follow-up survey.

The response rate in FY23 was likely influenced by a large number of Helpline participants being contacted for a research study during the first 4-5 months of the fiscal year. Once that study completed recruitment, response rebounded and was much closer to the targeted 50%. Respondents to the FY23 follow-up survey were more likely to be multiple call participants, and they received more calls and greater amounts of NRT than non-respondents.

Satisfaction with Services

Across all Helpline registrants, **96.3%** reported being “very,” “mostly,” or “somewhat” satisfied with Helpline services, with 3.1% being “not at all” satisfied and another 0.7% refusing or responding “don’t know.”



Quit Rates Reported at the 7- month Follow-up

Quit rates, defined as 30-day abstinence from tobacco, are calculated among survey respondents at the 7-month follow-up interval.

For each calculated quit rate, a 95% confidence interval (CI) is calculated and reported. This CI provides a range of values within which we are 95% confident that the “true” quit rate lies. Because

our calculated quit rates are based on a sample of the population, some uncertainty will exist about the accuracy of the estimate. The CI is interpreted as the “plausible” range of values for the true quit rate.

At the 7-month follow-up survey, **40.7%** (95% CI 38.2-43.2) of all participants reported not smoking for one month or longer. When e-cigarette use at the 7-month follow-up is considered (secondary quit measure as recommended by NAQC), the overall quit rate is 33.7% (95% CI 31.2-36.1).

Quit rates by Helpline services received and intermediate measure of quit are found in the appendix.

Highlighted Results from Follow-up Survey

Additional questions are asked on the follow-up survey to assess participants’ use of NRT and other medications since registering with the Helpline, as well as health status and rules about smoking in the home. Responses to all questions on the follow-up survey are found in the appendix. The following findings are highlighted:

- 36.1% of participants who received NRT from the Helpline used all of the product. Another 28.8% reported using most of the product.
- 24.6% of participants bought more NRT on their own.
- 94.5% of participants would recommend the Helpline to a friend trying to quit.
- Only 11.3% of participants with health insurance used their benefit for cessation support, and half of those who did (51.1%) received prescription medication.
- 69.8% of participants reported smoking is not allowed anywhere inside the home.
- 34.5% of participants reported their overall health was fair or poor.
- 17.2% of participants reported using an e-cigarette within the last 30 days, and more than three-quarters reported using them to quit regular cigarettes (76.7%).

Conclusions

This evaluation report demonstrates an increase in utilization of the Helpline as compared to FY22 (+22%). Registrations increased dramatically after the March transition to Rally and were also

impacted favorably by the “Limited Time Offer” expanded benefit offered two times during the year. As a result, the treatment reach for the Helpline was 3.4% in FY23, a 26% increase over FY22.

During FY23, about 25% of registrants used more than one tobacco/nicotine product in the last 30 days, with a large proportion using e-cigarettes or vaping products. Overall, e-cigarette use in the last 30 days was reported by 27.3% of all registrants. This represents a 16% increase when compared to FY22. Among those using an e-cigarette in FY23, 60.5% use them every day. These data provide further evidence of an emerging demand for Helpline services among non-cigarette and e-cigarette users who are nicotine dependent and want to quit.

The satisfaction and quit rates included in this report are collected 7-months after registration for services. All of the participants in the 7-month follow-up received services under the Apollo platform. Overall, FY23 quit rates were high; 40.7% of respondents to the follow-up survey reported not using tobacco within the past 30 days. This exceeds the NAQC benchmark of 30% abstinence for 30-days at the 7-month follow-up, and is likely due, in part, to higher levels of services received as a result of the expanded benefits for SoonerCare members, persons with behavioral health conditions and the limited time offers of more NRT.

The transition to Rally presented many data challenges, including completeness and harmonization with data collected under Apollo. The transition resulted in greater numbers of tobacco users enrolling in services, but the extent to which participants are more engaged, receive more services, and have better outcomes will continue to be monitored.

Appendix: Additional Data Tables

Table A1. Who is registering for services?

		FY23 N	FY23 %	Apollo Jul – Feb %	Rally Mar-Jun %
Sex	Male	10,520	40.7%	42.6%	38.2%
	Female	15,058	58.3%	56.4%	60.7
	Transgender, Non-Binary, Genderqueer, Other	198	0.8%	0.9%	0.5%
	Refused	59	0.2%	0%	0.5%
	Missing	10			
Race	White	18,475	71.9%	71.7%	72.0%
	Black or African American	1697	6.6%	6.5%	6.7%
	American Indian or Alaskan Native	2599	10.1%	9.9%	10.4%
	Multiracial	1542	6.0%	6.2%	5.8%
	Other	663	2.6%	2.7%	2.4%
	Not Known, Refused	737	2.9%	3.0%	2.7%
	Missing	132			
Ethnicity	Hispanic	1140	4.4%	4.6%	4.2%
	Non-Hispanic	23,676	92.8%	91.8%	94.0%
	Not Known, Refused	713	2.8%	3.6%	1.8%
	Missing	225			
Age	18-24	1825	7.1%	8.0%	5.8%
	25-34	4536	17.6%	18.5%	16.3%
	35-44	5795	22.4%	22.5%	22.3%
	45-54	4871	18.9%	18.1%	19.8%
	55-64	5315	20.6%	19.6%	21.8%
	65-74	2837	11.0%	10.7%	11.3%
	75+	661	2.6%	2.5%	2.7%
	Missing	5			

		FY23 N	FY23 %	Apollo Jul – Feb %	Rally Mar-Jun %
Education	Less than grade 9	519	3.0%	3.3%	2.8%
	Grade 9-11, no degree	2028	11.9%	12.4%	11.4%
	High School Degree or GED	6161	36.1%	35.1%	37.0%
	Some College or University	5303	31.1%	30.5%	31.6%
	College or University Degree	2764	16.2%	16.6%	15.9%
	Not Known, Refused	296	1.7%	2.1%	1.4%
	Missing	8774			
Income	<\$10,000	5794	24.6%	25.7%	22.7%
	\$10,000-14,999	3077	13.1%	13.0%	13.1%
	\$15,000-19,999	2412	10.2%	10.2%	10.3%
	\$20,000-24,999	2133	9.1%	8.3%	10.2%
	\$25,000-34,999	2384	10.1%	9.5%	11.2%
	\$35,000-49,999	2280	9.7%	9.2%	10.5%
	\$50,000-74,999	1476	6.3%	6.2%	6.4%
	\$75,000+	1075	4.6%	4.4%	4.8%
	Not Known, Refused	2931	12.4%	13.5%	10.7%
	Missing	2283			
Health Insurance	Medicaid	8267	32.2%	33.1%	30.9%
	Medicare	4497	17.5%	18.3%	16.5%
	Private Insurance	6045	23.5%	20.9%	26.9%
	Uninsured	5485	21.3%	21.6%	21.0%
	Veterans/Military	298	1.2%	1.3%	0.9%
	Not Known, Refused	1111	4.3%	4.8%	3.7%
	Missing	142			

		FY23 N	FY23 %	Apollo Jul – Feb %	Rally Mar-Jun %
Pregnancy status (among women <50)	Currently Pregnant	233	2.8%	2.8%	2.7%
	Planning to become pregnant in the next 6 months	183	2.2%	2.2%	2.2%
	Currently Breastfeeding	68	0.8%	0.7%	1.0%
Active service military or veteran/retired including Reserve & National Guard	Yes	1637	6.4%	6.1%	6.7%
One or more mental health/substance abuse disorder	Yes	13,394	55.7%	58.0%	53.1%
MHSA Condition will interfere with ability to quit, among those with at least one	Yes	5389	39.6%	33.2%	49.1%
	Don't know	2696	20.2%	19.2%	21.4%

Table A2. Type of NRT received from the Helpline among tobacco users receiving NRT, FY23

Type of NRT	FY23 N	FY23 %	Apollo Jul-Feb %	Rally Mar-Jun %
Gum	2551	12.4%	14.3%	9.8%
Lozenge	2111	10.2%	13.7%	5.7%
Patch	7295	35.4%	41.9%	26.9%
Gum and Lozenge	97	0.5%	0.6%	0.3%
Patch and Gum	4795	23.3%	12.8%	37.0%
Patch and Lozenge	3569	17.3%	15.8%	19.3%
Patch, Gum and Lozenge	178	0.9%	0.8%	0.9%

Table A3. Number of tobacco users who registered for services by county, FY23 (n=25,845)

County	Apollo	Rally	County	Apollo	Rally	County	Apollo	Rally
Adair	50	38	Grant	10	6	Nowata	45	36
Alfalfa	21	9	Greer	23	19	Okfuskee	42	26
Atoka	65	41	Harmon	2	6	Oklahoma	2503	1904
Beaver	7	6	Harper	10	5	Okmulgee	156	153
Beckham	106	58	Haskell	40	42	Osage	230	211
Blaine	27	18	Hughes	43	46	Ottawa	173	108
Bryan	189	165	Jackson	66	48	Pawnee	69	43
Caddo	91	59	Jefferson	21	14	Payne	235	153
Canadian	381	292	Johnston	54	52	Pittsburg	237	168
Carter	267	203	Kay	176	145	Pontotoc	230	163
Cherokee	173	137	Kingfisher	39	21	Pottawatomie	358	296
Choctaw	47	56	Kiowa	26	21	Pushmataha	34	46
Cimarron	4	2	Latimer	37	32	Roger Mills	5	5
Cleveland	865	658	Le Flore	133	130	Rogers	341	224
Coal	22	20	Lincoln	110	102	Seminole	126	98
Comanche	443	296	Logan	207	125	Sequoyah	143	113
Cotton	32	17	Love	41	33	Stephens	147	154
Craig	90	55	Major	28	17	Texas	12	25
Creek	292	258	Marshall	88	71	Tillman	31	19
Custer	76	56	Mayes	214	112	Tulsa	2432	1674
Delaware	191	136	McClain	171	98	Wagoner	240	200
Dewey	17	9	McCurtain	172	128	Washington	218	171
Ellis	8	5	McIntosh	100	61	Washita	42	34
Garfield	259	189	Murray	78	56	Woods	42	38
Garvin	111	76	Muskogee	406	324	Woodward	119	42
Grady	186	182	Noble	38	18	Unknown	73	332
						Total	14636	11209

Table A4. Electronic, fax, and online referrals to the Helpline, FY23 (n=13,675)

	Type of Referral						All Referrals Combined	
	Electronic Referral		Fax Referral		Online Referral*			
Referral Status	Apollo	Rally	Apollo	Rally	Apollo	Rally	Apollo	Rally
Accepted & enrolled in services	10.4%	3.6%	22.7%	9.9%	12.1%	6.4%	12.2%	5.5%
Accepted but didn't enroll	0.3%	.	0.2%	.	0.2%	.	0.2%	.
Declined services when contacted	16.8%	7.9%	19.7%	4.5%	14.7%	4.1%	15.8%	5.8%
Unreachable	55.4%	66.3%	51.8%	62.7%	58.3%	81.0%	56.8%	73.4%
Duplicate referral	7.6%	6.7%	2.3%	2.2%	0.5%	2.2%	3.3%	4.1%
Already enrolled at time of referral	3.8%	0.1%	3.1%	1.0%	13.3%	0.3%	9.0%	0.3%
Not enough info/Do not contact	5.4%	1.3%	0.2%	2.2%	.	1.1%	2.1%	1.3%
Pending referral	0.3%	14.0%	0.2%	17.5%	0.8%	4.8%	0.6%	9.7%
<i>Total</i>	<i>3535</i>	<i>1866</i>	<i>651</i>	<i>314</i>	<i>5111</i>	<i>2198</i>	<i>9297</i>	<i>4378</i>

*includes 64 "self-referrals" through an OHCA web portal

Table A5. 30-day abstinence from traditional tobacco by Helpline program*, FY23

Program*	Total N	Percent Abstinent	95% CI
Overall	1,466	40.7%	(38.2, 43.2)
All Single Call	81	43.2%	(32.4, 54.0)
All Multiple Call	735	43.4%	(39.8, 47.0)
Multiple Call + 4-6 weeks NRT	372	39.8%	(34.8, 44.8)
Multiple Call + 8+ weeks NRT	326	47.5%	(42.1, 53.0)
Multiple Call + 4-6 weeks NRT, combo NRT	239	37.7%	(31.5, 43.8)
Multiple Call + 4-6 weeks NRT, single NRT	133	43.6%	(35.2, 52.0)
Multiple Call + 8+ weeks NRT, combo NRT	230	47.4%	(40.9, 53.8)
Multiple Call + 8+ weeks NRT, single NRT	96	47.9%	(37.9, 57.9)
Individual Services	587	39.0%	(35.1, 43.0)
Web Coach	63	22.2%	(12.0, 32.5)

*Programs are not mutually exclusive

Table A6. 30-day abstinence from traditional tobacco by services received, FY23

Service	Total N	Percent Abstinent	95% CI
Coaching + NRT, with or without text & email	770	43.5%	(40.0, 47.0)
NRT + text & email	433	41.6%	(36.9, 46.2)
NRT only	222	29.3%	(23.3, 35.3)

Table A7. 30-day abstinence from traditional tobacco and e-cigarettes by Helpline program*, FY23

Program*	Total N	Percent Abstinent	95% CI
Overall	1,471	33.7%	(31.2, 36.1)
All Single Call	81	37.0%	(26.5, 47.6)
All Multiple Call	737	36.6%	(33.2, 40.1)
Multiple Call + 4-6 weeks NRT	373	31.9%	(27.2, 36.6)
Multiple Call + 8+ weeks NRT	326	42.6%	(37.3, 48.0)
Multiple Call + 4-6 weeks NRT, combo NRT	240	28.3%	(22.6, 34.0)
Multiple Call + 4-6 weeks NRT, single NRT	133	38.3%	(30.1, 46.6)
Multiple Call + 8+ weeks NRT, combo NRT	230	41.7%	(35.4, 48.1)
Multiple Call + 8+ weeks NRT, single NRT	96	44.8%	(34.8, 54.7)
Individual Services	589	31.1%	(27.3, 34.8)
Web Coach	64	18.8%	(9.2, 28.3)

Table A8. 30-day abstinence from traditional tobacco and e-cigarettes by services received, FY23

Service	Total N	Percent Abstinent	95% CI
Coaching + NRT, with or without other	771	36.8%	(33.4, 40.2)
NRT + other	436	32.1%	(27.7, 36.5)
NRT only	222	25.7%	(19.9, 31.4)

Table A9. Intermediate quit measures, FY23

Quit Measure	Total N	Percent/ Average Change	95% CI
Quit using tobacco for 24 hours or longer	1,474	87.8%	(86.1, 89.5)
Quit using tobacco for 30 or more days at any point during follow-up	1,455	50.9%	(48.4, 53.5)
Reduced number of cigarettes per day, among those still smoking	726	72.6%	(69.3, 75.8)
Average change in number of cigarettes per day, among those still smoking	726	-8.1	(-8.8, -7.3)

Table A9. Overall satisfaction with the Helpline by program, FY23

Helpline Program	% Satisfied*
Single call	91.3%
Multiple call	96.6%
Individual Services	96.9%
Web Coach	92.3%
<i>Total</i>	<i>96.3%</i>
Amount of NRT received**	% Very Satisfied
4-6 weeks of NRT	64.7%
8+ weeks of NRT	73.9%

*Denotes very satisfied, mostly satisfied, or somewhat satisfied.

**Sample size for No NRT and 2-weeks NRT too small to report

Table A10. Other questions asked at 7-month follow-up, FY23

Did you use any of the following products or medications since registering with the Helpline?	%
NRT Patches	68.5%
NRT Gum	31.9%
NRT Lozenge	32.1%
NRT Inhaler or Spray	0.4%
Prescription drug (Zyban)	4.9%
Prescription drug (Chantix)	4.3%

How much of the NRT sent by the Helpline did you use?	%
All of them	36.1%
Most of them	28.8%
Some of them	28.1%
None of them	5.4%
Did not receive them	1.6%
Among Combo NRT recipients (n=477), did you understand how to use patches and other NRT together?	%
Yes	76.7%
No	5.2%
I don't know	18.0%
Did you buy more NRT on your own?	%
Yes	24.6%
No	75.3%
I don't know	0.1%
The Helpline program was easy to understand	%
Strongly agree	66.8%
Agree	30.1%
Disagree	2.0%
Strongly Disagree	0.5%
I don't know	0.5%
Would you recommend the Helpline to a friend trying to quit?	%
Yes	94.5%
No	2.8%
Maybe/I don't know	2.7%
Since enrolling in the Helpline, did you have health insurance	%
Yes	81.3%
No/Don't know	18.7%

Did you use your insurance benefit to get help quitting (among those with health insurance, n=1191)?	%
Yes	11.3%
No/Don't know	88.7%
What covered service did you receive (among those who used benefit, n=133)?	%
NRT	34.5%
Prescription pill (Zyban, Chantix, Bupropion)	51.1%
How would you describe the rules about smoking in your home?	%
No one is allowed to smoke anywhere inside your home	69.8%
Smoking is allowed in some places or at some times	12.3%
Smoking is permitted anywhere inside your home	17.2%
How would you describe your overall health?	%
Excellent	7.7%
Very good	21.8%
Good	35.3%
Fair	24.3%
Poor	10.2%
How many days physical health not good (on average)	8.22 days
How many days mental health not good (on average)	9.73 days
Because of the COVID-19 pandemic, has your motivation to quit....	%
Increased	25.3%
Decreased	11.6%
Stayed the same	57.2%
Because of the COVID-19 pandemic, has quitting become...	%
Easier	8.4%
Harder	23.6%
About the same	66.2%

Table A11. E-cigarette questions asked at the 7-month follow-up

Since calling the helpline, have you used an e-cigarette?	%
Yes	24.0%
Have you used an e-cigarette in the last 30 days?	%
Yes	17.2%
Among those using e-cigarettes in last 30 days, # of days used	%
<10 days	29.2%
10-19 days	17.3%
20-29 days	4.9%
30 days	48.1%
Among those using e-cigarettes in last 30 days, did you use them to quit smoking?	%
Yes	76.7%
Among those using e-cigarettes in last 30 days, do you intend to quit e-cigarettes and vaping products?	%
In the next 30 days	32.1%
In the next six months	36.3%
Sometime in the future, but not in the next six months	13.2%
No plans to quit them	13.7%
Not known/Refused	4.7%
Among e-cigarette users at registration.... were you hoping to receive support to quit using e-cigarettes or vaping products (n=371)	%
Yes	36.4%
Among those who said "Yes" (n=135), How helpful were the services you received from the Helpline in terms of supporting you to quit e-cigarettes or vaping products	%
Very helpful	57.1%
Mostly helpful	24.8%
Somewhat helpful	11.3%
Not at all helpful	4.5%