

Help Patients Quit via e-Referral to Kick It California

A Guide to Implementation



ASK. ADVISE. REFER.

KICK / T
California

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Welcome to the Kick It California e-Referral Integration Guide

This guide explains three ways your team can set up an electronic referral (e-referral) system with Kick It California. The e-referral system makes patient referrals easy, secure, and fast. This information is designed for healthcare professionals and IT (information technology) teams to help you choose the e-referral method that's best for your organization.

Please note: Much of the setup outlined in this guide will require the knowledge and expertise of an IT professional.

Kick It California supports all efforts to help Californians quit tobacco. These efforts include regular screenings for tobacco use or secondhand smoke exposure, urging patients to quit, and offering quit resources. As a healthcare professional, you play an integral role in the collective effort to make quit help accessible to your patients.

We look forward to partnering with you and making patient referrals as successful as possible!

Introduction

About Kick It California

The California Smokers' Helpline was founded in 1992 at the University of California, San Diego, and was rebranded as Kick It California (KIC) in 2021. As the only statewide resource for quitting tobacco in California, the program is 100% free for any person wanting to kick tobacco or help a loved one quit. Treatment is available for all types of tobacco use and is tailored to meet people at any stage of the quitting process. To date, the service has enrolled over a million Californians.

The program includes:

- Free, personalized support for tobacco users and those wanting to help others quit.
- One-on-one coaching, self-help materials, a text messaging service program, online chat, online video intervention, and mobile apps
- Service in six languages: English, Spanish, Chinese, Mandarin, Korean and Vietnamese
- Special resources to Help Youth Quit Vaping, for First 5 populations (pregnant & parents of children 0-5), and for friends and family of tobacco users.

Kick It California's caring and skilled Quit Coaches are available:

- Monday through Friday from 7 a.m. to 9 p.m.
- Saturdays from 9 a.m. to 5 p.m.

Patients can call 1-800-300-8086 to be immediately connected with a Quit Coach.

Quit Help Based on Science

Kick It California's telephone coaching is based on science and proven in clinical trials to double a person's chance of quitting. Our university affiliation builds credibility while inspiring a culture of excellence and innovation.

Quit Coaches have a bachelor's degree or higher and undergo robust training. They also take part in weekly supervision meetings and ongoing education. It's important to note that our Quit Coaches are nonjudgmental in their approach and proactive in providing support. They understand that quitting nicotine may be the hardest thing many of our clients have ever done.

Overview

What is e-Referral?

e-Referral is the seamless transfer of patient information to Kick It California's client management system. An e-referral system helps keep patient data safe and secure during transfer.

Kick It California accepts both tobacco users and friends or loved ones of tobacco users that wish to quit or help someone else quit. Please note that referred patients must be at least 13 years old and live in the state of California.

Why Use e-Referral?

e-Referral is simple and useful for both patients and professionals.

For patients, the e-referral system:

- **Increases access** to free quit services by making it easy for providers to connect tobacco users with them
- **Expands reach** with ten times more tobacco users receiving service, versus without e-referral
- **Boosts success rates** with more patients quitting and reducing overall healthcare costs

Health professionals also benefit from adopting the e-referral system:

- **Eligible providers may meet incentive programs** such as Meaningful Use (MU), MACRA, and MIPS
- Kick It California is a Specialized Registry under the California Department of Public Health and may help meet reporting standards for MU and MACRA
- Reporting to a Specialized Registry counts as "bonus credit" in the Advancing Care Information metric of MIPS
- Kick It California may count as the "cessation counseling" portion for meeting the Quality metric under "Tobacco screening AND cessation counseling intervention (measures 0028/226 & N/A/402)"
- **Maximizes productivity** by automating the referral process and giving providers more time with patients
- **Streamlines data transfer** by making it quick, convenient, and secure
- **Tracks efforts** through regular reporting

For more detailed information, please refer to: <https://hie.cdph.ca.gov/specialized-registries.html>

If you have any questions specific to Specialized Registries, please send your inquiries to MeaningfulUse@cdph.ca.gov.

How It Works

Clinician Workflow

The e-referral program makes it easy for clinicians to refer patients without changing their workflow. It also gives them more time to talk with their patients about other possible issues from tobacco use.

You can use the Ask-Advise-Refer (AAR) approach to refer patients to Kick It California:

1. **Ask** the patient about their current tobacco use
2. **Advise** the patient to quit smoking and assess their desire to quit
3. **Refer** them to Kick It California

Kick It California Workflow

Kick It California starts processing the referrals right away.

1. A Quit Coach calls the patient within two business days to enroll them in the program (see diagram below)
2. The Quit Coach makes five calls total over a two week period to reach the patient
3. Kick It California sends helpful materials to patients who weren't reached

¹ Schroeder SA. What to do with a patient who smokes. JAMA. 2005;294(4):482-487

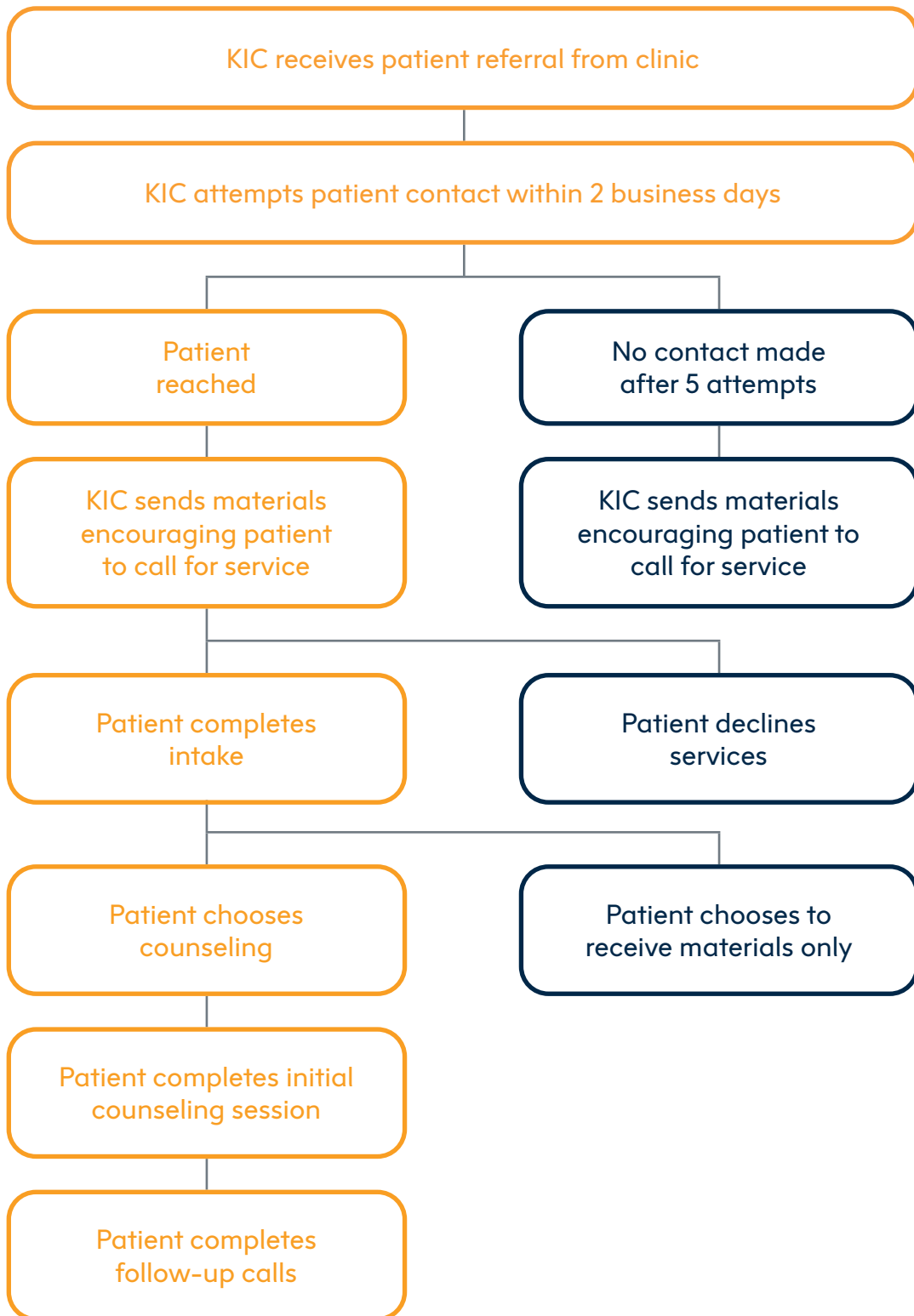


Instead of asking a patient to call, now a provider can tell a patient they will receive a call. People's lives are busy and they forget to call.



– Dr. Elisa Tong, M.D. UC Davis

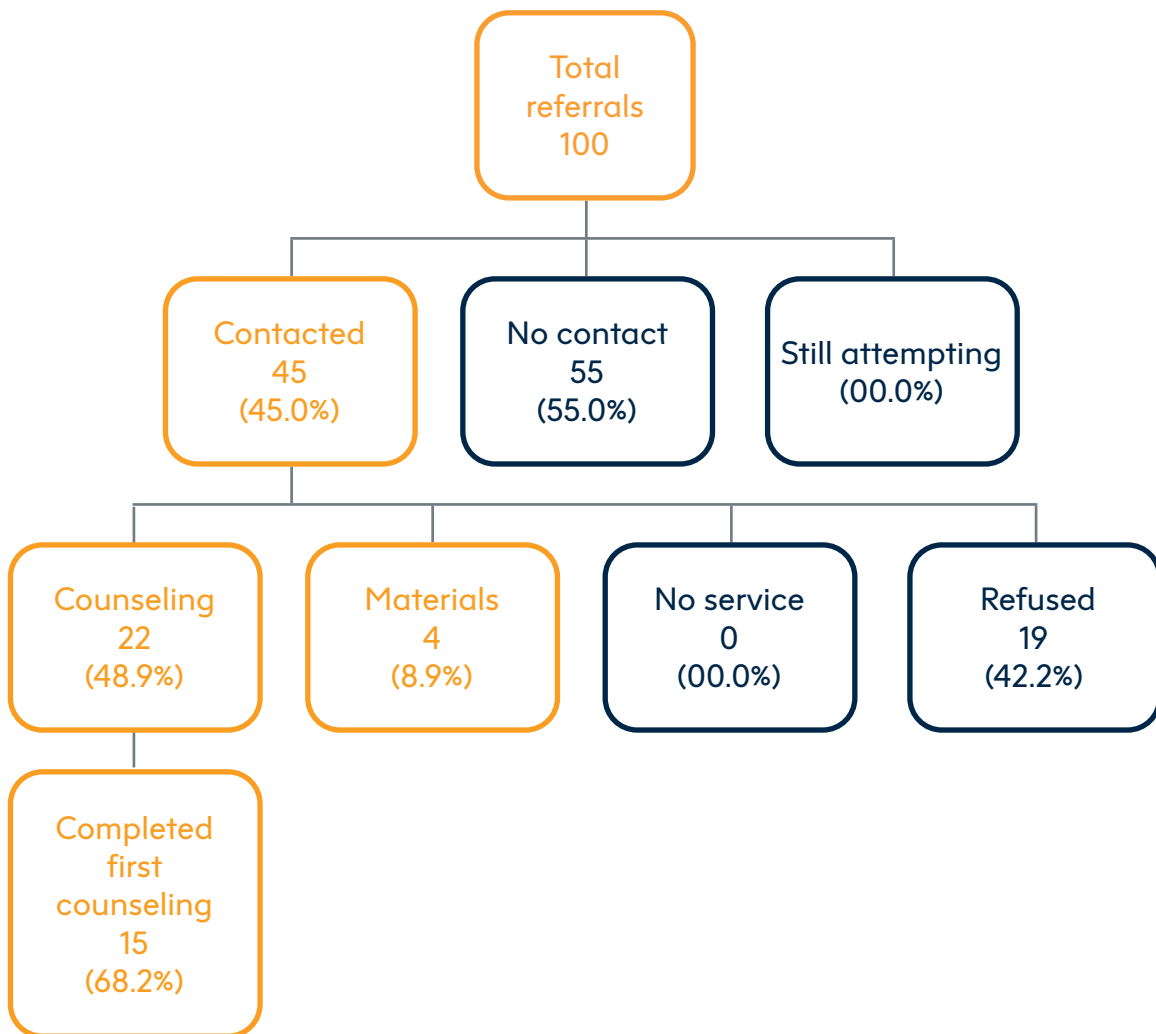
Workflow



Monthly Reports

Kick It California keeps track of all referrals your organization makes and gathers them into a monthly report. These reports help clinicians see a broad picture of how the e-referral system is working and any areas they may wish to adjust their workflow.

As more health professionals become familiar with this process, our goal is to see the number of referrals grow over time. Combined numbers show a breakdown of referrals, like the example below.



Data Transfer

Security

The security of patient information is of paramount importance. Kick It California is a HIPAA-covered entity and must comply with HIPAA Privacy, Security, and HITECH Breach Final Rules.

Consent

Organizations may only release patient information to Kick It California with the patient's permission. In order to refer them to the program, the provider must obtain the patient's oral consent during the visit. Below is a sample consent that could be used.

The household tobacco user, patient, or patient's guardian (if under 18) has agreed to have Kick It California contact them for help with a quit plan or more information about quitting nicotine. The patient or patient's guardian (if under 18) has also agreed that Kick It California may provide their healthcare provider with the results of their participation including whether they declined service or were unable to be reached.

e-Referral Methods

There are three ways to transfer patient data to Kick It California. They are:

1. **DIRECT Messaging**

Integration through HISP (health information systems provider)

2. **Peer-to-Peer**

Utilizes standard TCP/IP or LLP via VPN tunnel

3. **Custom**

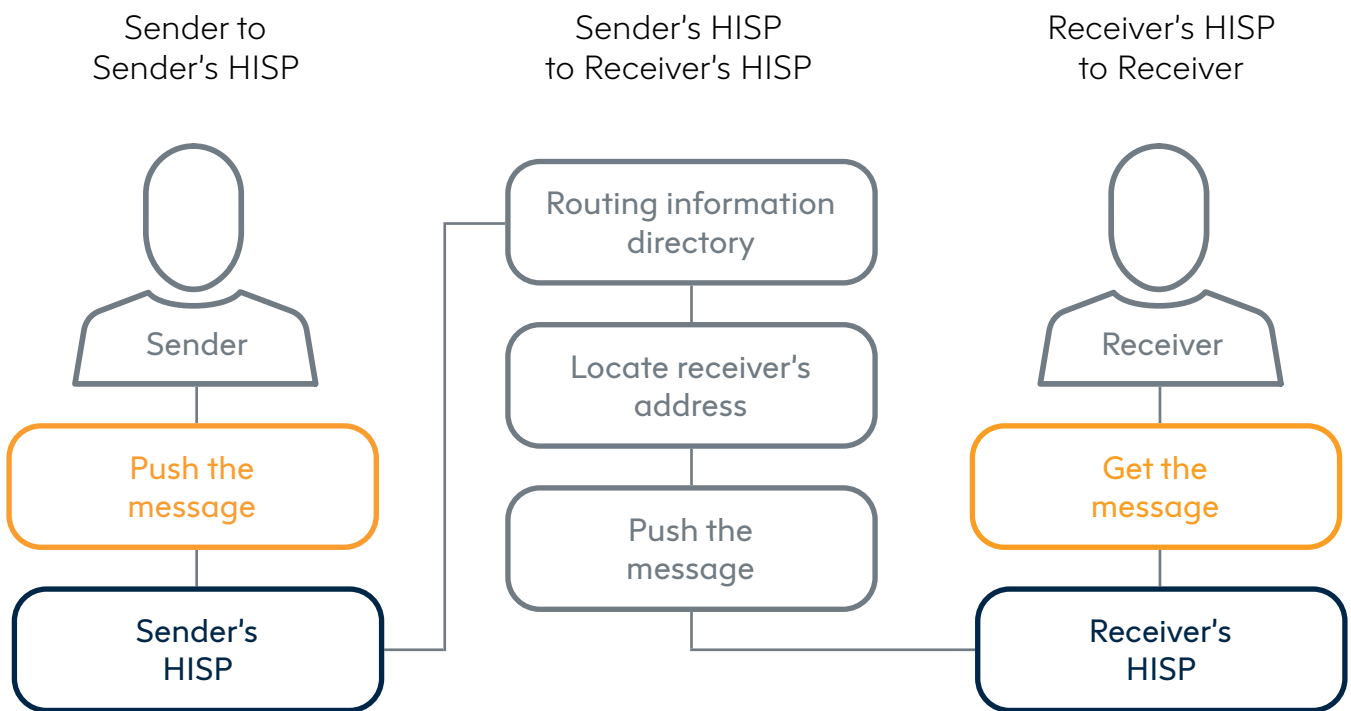
Standard formats (e.g., CSV, pipe delimited, fixed length, etc.) and transports (e.g. web-services, SOAP).

DIRECT Messaging

DIRECT messaging allows Kick It California to enable rapid integration through your organization's HISP (e.g., CADirect.org or EMRDirect.com). This method allows health professionals to electronically send patient referrals with easy and affordable clinical messaging.

DIRECT Workflow

The diagram below shows how the referral is electronically transferred to Kick It California through a HISP.



DIRECT Messaging

Getting Started

There are a few simple steps to get started with DIRECT:

1. If your organization does not have a DIRECT account, you will need to enroll with a HISP, such as CADirect.org or EMRDirect.com.
2. Once the DIRECT account is established, you can begin referring. Our DIRECT address is CAsmokers.help@ucsd.cadirect.org.

Benefits of DIRECT

There are many benefits to using DIRECT:

1. Most organizations already use DIRECT messaging
2. Limited IT resources are needed to be up and running
3. Small start-up costs (usually <\$100 that goes toward creating a Direct account)
4. Easy to integrate into provider workflow
5. Can be used by small operations that do not use EHR
6. May meet reporting metrics (e.g. MU, MIPS)
7. Potential for organizations to get individual-level patient data

Drawbacks to Direct

- Possible limitation of data transferred from KIC to the organization
- There may be an additional fee (\$3500) to build results messages (i.e. two-way communication between KIC and the organization)

For more information visit:

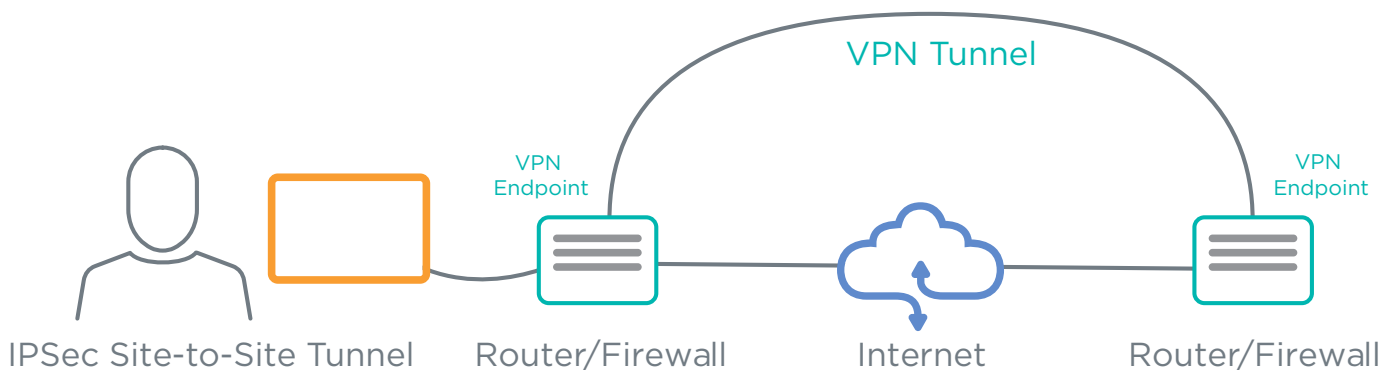
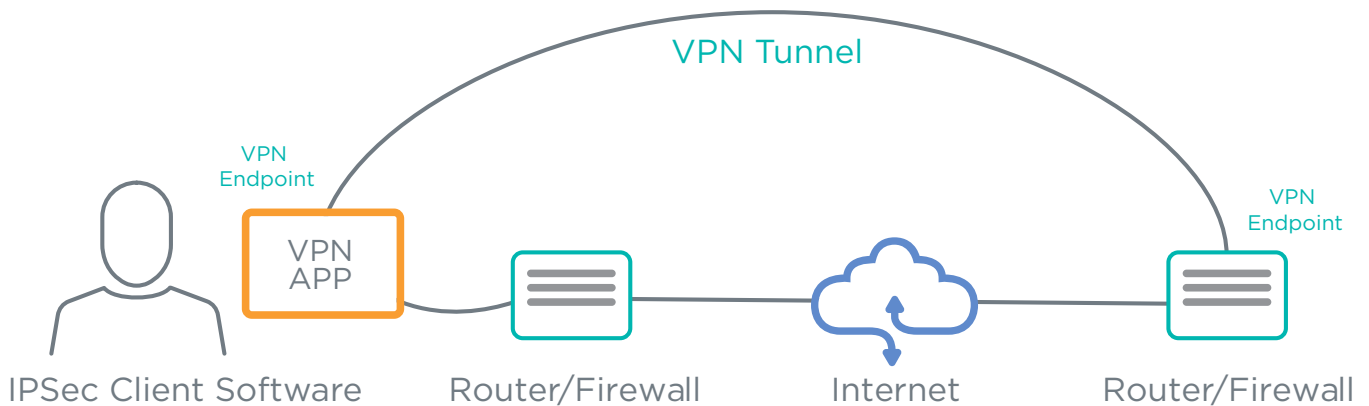
https://www.healthit.gov/sites/default/files/directbasicsforprovidersqa_05092014.pdf

Peer-to-Peer

The Peer-to-Peer method uses standard TCP/IP or LLP via VPN tunnels to send patient referrals to Kick It California. Kick It California creates an HL7 interface, which securely transfers patient information via VPN tunnel. Individual-level patient data can be sent back to the EHR. Transport options supported include LLP, TCP/IP, and web services. Note that any of these options may help contribute to the Meaningful Use incentive program.

This is a good option for organizations that have:

- Mature integration platforms
- IT support team because it takes more resources to set up than DIRECT
- Sufficient budget for establishing e-Referral



Peer-to-Peer

Getting Started

IT teams from Kick It California and your organization will:

- Establish functional VPN tunnel
- Agree on data format/fields and transport mechanism
- Determine when data should be sent to Kick It California (e.g. hourly, daily)

Technical information HL7 2x or equivalent if using a different standard:

Messages pushed from the EHR to Kick It California:

- Require MSH, PID and ORC segments
- Typically, the OBR segment is included (although not required) within the referral message
- NTE segments are used for optional, implementation specific information

Messages pushed from Kick It California to the EHR:

- Contain MSH and PID segments
- Optional segments are dependent on the EHR capabilities and the specific implementation
- Kick It California's interface is ORM-based. Consequently, updates from Kick It California to the EHR are in the form of an ORU in response to the original order referral
- Result messages can include: date patient completed intake, date of counseling sessions, date items (such as materials or patches) were mailed to patient, date of scheduled counseling calls, and whether the patient declined our services or was unable to be reached.

Peer-to-Peer

Benefits of Using Peer-to-Peer

- Tight integration in workflow
- Providers receive individual-level results messages from Kick It California:
 - Closing the loop of the referral order
 - Messages provide updates on which KIC services the patient has used, and smoking status at each counseling call
- Ability to limit the amount of data sent and received

Drawbacks to Peer-to-Peer

- Cost – \$7,000 start-up free + monthly maintenances (e.g., admin/engineering time, service agreements, etc.)
- Longest ramp up time
 - Legal and IT Security reviews
 - VPN tunnel needs to be established
- Maintenance/monitoring required by your organization

Summary

	DIRECT Messaging	Peer-to-Peer (TCP/IP or LLP)	Custom
Data Transfer	Data sent via secure email	Data sent via VPN tunnel	Data sent via agreed on method
Start-up Cost	Free, unless organization wants a bi-directional interface (~\$3500)	~\$7,000	Variable
Maintenance fees	\$50/month (bi-directional interface)	\$150/month	Variable
Reporting	Aggregate referral disposition (individual patient referral disposition with bi-directional interface)	Individual patient referral disposition	Variable
IT Resources	Minimal	Moderate	A lot
Implementation Time	Minimal	Moderate	A lot
Meet MU	May meet MU	May meet MU	May meet MU

Setting Up e-Referral

1 – Choose an e-Referral Method

Decide which data transfer method is right for your organization. When you are ready to get started, or if you have any questions, please contact: meaningfuluse@ucsd.edu or cessationtraining@ucsd.edu

2 – Set a Scope of Work

Your organization and Kick It California will establish a Scope of Work (SOW) and set up a Purchase Order (PO), if applicable. Once these documents are agreed upon, clinicians can start receiving training on how to refer patients to Kick It California.

3 – Get Training

Kick It California works with providers to provide free training, both in-person and via webinar, to help you become acquainted with the referral process and program. For more information, please contact meaningfuluse@ucsd.edu or cessationtraining@ucsd.edu.

4 – Do a Test Run

For Direct messaging – When your organization is ready to test sending patient data, please contact us at meaningfuluse@ucsd.edu or cessationtraining@ucsd.edu. Once we confirm receipt of the referral along with uploading patient information, implementation is ready to begin.

For Peer-to-Peer – Once the VPN tunnel is established, programmers work in a test environment to create test orders and result messages. Once these are established and working, the orders are moved to production and implementation is ready to begin.

5 – Continued Training and Reporting

To ensure the best outcome, clinicians should receive continued training on e-referral, especially as new staff joins your organization. Reports will also help Kick It California and your organization gauge progress. We are available at any time to answer your questions, share best practices and illustrate the importance of e-referral. We are confident that continued training will help clinicians stay engaged and excited about helping tobacco users quit!

Adopters

We began our first e-referral transmission in 2013 with University California, Davis.

In 2014/2015, we expanded to the additional 4 UC systems (University California: Irvine, Los Angeles, San Diego, and San Francisco).

Since 2015, we've expanded to additional providers and healthcare systems.

To date, we have implemented the e-referral system with 23 providers/organizations. Our partners include:

Alameda Health Systems

E-Consult LA

Kern Medical

Native American Health

Gardner Health Services

**Tracy Orthopedics &
Sports Medical Center**

Dr. Patel

**Comprehensive
Cardiovascular Specialists**

Visalia Medical Clinic

Imperial Beach Clinic

Hazel Hawkins Memorial

Dr. Vahdat

Tri-City

LifeLong Medical

Visalia Medical Group

Mendocino Coast Clinic

Sutter Health

Contra Costa Health Services

Dameron Hospital

Shasta Community Health Center

Dr. Arora

Dr. Parson

Rady Children's Hospital

We are currently in discussion with an additional 15 providers and another 6 who have expressed interest and/or want to get more information.



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Doubles a Smoker's Chance of Quitting for Good

Services

Telephone Counseling
Self-Help Materials

Text Messaging
Online Chat

Mobile App

English
1-800-300-8086

Spanish
1-800-600-8191

Korean
1-800-556-5564

Mandarin / Cantonese
1-800-838-8917

Vietnamese
1-800-778-8440

Enroll online at
www.kickitca.org

Find us on



Funded by the California Department of Public Health and First 5 California

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